By the Committee on Governmental Oversight and Accountability; and Senator Brandes

A bill to be entitled

585-02904-14

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2 An act relating to government data practices; amending 3 s. 257.36, F.S.; requiring the Division of Library and 4 Information Services of the Department of State to 5 adopt rules providing procedures for an agency to 6 establish schedules for the physical destruction or 7 other disposal of records containing personal 8 identification information; creating part IV of ch. 9 282, F.S., consisting of s. 282.801, F.S.; providing 10 definitions; requiring an agency that collects and 11 maintains personal identification information to post 12 a privacy policy on the agency's website; prescribing 13 minimum requirements for a privacy policy; requiring an agency to provide notice of the installation of 14 15 cookies on an individual's computer; requiring that an 16 individual who would otherwise be granted access to an 17 agency's website be granted access even if he or she 18 declines to have the cookie installed; providing an exception; requiring that privacy policy requirements 19 20 be specified in a contract between a public agency and 21 a contractor; specifying that a violation does not 22 create a civil cause of action; requiring the Office 23 of Program Policy Analysis and Government Accountability to submit a report to the Legislature 24 25 by a specified date; providing report requirements; creating s. 429.55, F.S.; requiring the Agency for 2.6 Health Care Administration to provide specified data 27 28 on assisted living facilities by a certain date; 29 providing minimum requirements for such data;

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30	authorizing the agency to create a comment webpage
31	regarding assisted living facilities; providing
32	minimum requirements; authorizing the agency to
33	provide links to certain third-party websites;
34	authorizing the agency to adopt rules; amending s.
35	408.05, F.S.; dissolving the Center for Health
36	Information and Policy Analysis within the Agency for
37	Health Care Administration; requiring the agency to
38	coordinate a system to promote access to certain data
39	and information; requiring that certain health-related
40	data be included within the system; assigning duties
41	to the agency relating to the collection and
42	dissemination of data; establishing conditions for the
43	funding of the system; requiring the Office of Program
44	Policy Analysis and Government Accountability to
45	monitor the agency's implementation of the health
46	information system; requiring the Office of Program
47	Policy Analysis and Government Accountability to
48	submit a report to the Legislature after completion of
49	the implementation; providing report requirements;
50	reenacting s. 120.54(8), F.S., relating to rulemaking,
51	to incorporate the amendment made to s. 257.36, F.S.,
52	in a reference thereto; amending ss. 20.42, 381.026,
53	395.301, 395.602, 395.6025, 408.07, 408.18, 465.0244,
54	627.6499, and 641.54, F.S.; conforming provisions to
55	changes made by the act; providing an effective date.
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57	Be It Enacted by the Legislature of the State of Florida:
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59	Section 1. Subsection (6) of section 257.36, Florida
60	Statutes, is amended to read:
61	257.36 Records and information management
62	(6) A public record may be destroyed or otherwise disposed
63	of only in accordance with retention schedules established by
64	the division. The division shall adopt reasonable rules
65	<u>consistent</u> not inconsistent with this chapter which <u>are</u> shall be
66	binding on all agencies relating to the destruction and
67	disposition of records. Such rules <u>must</u> shall provide, but <u>need</u>
68	not be limited to:
69	(a) Procedures for complying and submitting to the division
70	records-retention schedules.
71	(b) Procedures for the physical destruction or other
72	disposal of records.
73	(c) Procedures for an agency to establish schedules for the
74	physical destruction or other disposal of records held by the
75	agency which contain personal identification information, as
76	defined in s. 282.801, after meeting retention requirements.
77	Unless otherwise required by law, an agency may indefinitely
78	retain records containing information that is not identifiable
79	as related to a unique individual.
80	<u>(d)</u> Standards for the reproduction of records for
81	security or with a view to the disposal of the original record.
82	Section 2. Part IV of chapter 282, Florida Statutes,
83	consisting of section 282.801, Florida Statutes, is created to
84	read:
85	PART IV
86	GOVERNMENT DATA COLLECTION PRACTICES
87	282.801 Government data practices
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CS	for	SB	782
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88	(1) For purposes of this part, the term:
89	(a) "Agency" has the same meaning as in s. 119.011.
90	(b) "Cookie" means data sent from a website which is
91	electronically installed on a computer or electronic device of
92	an individual who has accessed the website and transmits certain
93	information to the server of that website.
94	(c) "Individual" means a human being and does not include a
95	corporation, a partnership, or any other business entity.
96	(d) "Personal identification information" means an item,
97	collection, or grouping of information that may be used, alone
98	or in conjunction with other information, to identify a unique
99	individual, including, but not limited to, his or her:
100	1. Name;
101	2. Postal or e-mail address;
102	3. Telephone number;
103	4. Social security number;
104	5. Date of birth;
105	6. Mother's maiden name;
106	7. Official state-issued or United States-issued driver
107	license or identification number, alien registration number,
108	government passport number, employer or taxpayer identification
109	number, or Medicaid or food assistance account number;
110	8. Bank account number, credit or debit card number, or
111	other number or information that can be used to access an
112	individual's financial resources;
113	9. Educational records;
114	10. Medical records;
115	11. License plate number of a registered motor vehicle;
116	12. Images, including facial images;

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585-02904-14 2014782c1 117 13. Biometric identification information; 118 14. Criminal history; or 119 15. Employment history. 120 (2) An agency that collects personal identification 121 information through a website and retains such information shall 122 maintain and conspicuously post a privacy policy on such 123 website. At a minimum, the privacy policy must provide: 124 (a) A description of the services the website provides. 125 (b) A description of the personal identification 126 information that the agency collects and maintains from an 127 individual accessing or using the website. 128 (c) An explanation of whether the agency's data collecting 129 and sharing practices are mandatory or allow a user to opt out 130 of those practices. 131 (d) Any available alternatives to using the website. 132 (e) A statement as to how the agency uses the personal 133 identification information, including, but not limited to, 134 whether and under what circumstances the agency discloses such 135 information. 136 (f) Whether any other person, as defined in s. 671.201, 137 collects personal identification information through the 138 website. 139 (g) A general description of the security measures in place 140 to protect personal identification information; however, such description must not compromise the integrity of the security 141 142 measures. 143 (h) An explanation of public records requirements relating 144 to the personal identification information of an individual 145 using the website and if such information may be disclosed in

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585-02904-14 2014782c1 146 response to a public records request. (3) (a) An agency that uses a website to install a cookie on 147 an individual's computer or electronic device shall inform an 148 149 individual accessing the website of the use of cookies and 150 request permission to install a cookie on the individual's 151 computer. 152 (b) If an individual accessing the website of an agency declines to have cookies installed, such individual shall still 153 154 be allowed to access and use the website. 155 (c) This subsection does not apply to a cookie temporarily 156 installed on an individual's computer or electronic device by an 157 agency if the cookie is installed only in the computer's or 158 electronic device's memory and is deleted from such memory when 159 the website browser or website application is closed. (4) Any contract between a public agency, as defined in s. 160 161 119.0701(1)(b), and a contractor, as defined in s. 162 119.0701(1)(a), must specify that the contractor must comply 163 with the requirements in subsections (2) and (3). 164 (5) The failure of an agency to comply with this section 165 does not create a civil cause of action. 166 Section 3. The Office of Program Policy Analysis and Government Accountability shall submit a report to the President 167 of the Senate and the Speaker of the House of Representatives by 168 169 July 1, 2015, which: 170 (1) Identifies personal identification information, as 171 defined in s. 282.801, Florida Statutes, and the records in 172 which such information is contained, held by a state agency. For purposes of this section, the term "state agency" has the same 173 meaning as in s. 216.011(1)(qq), but does not include state 174

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585-02904-14 2014782c1 175 attorneys, public defenders, criminal conflict and civil 176 regional counsel, capital collateral regional counsel, the 177 Justice Administrative Commission, the Florida Housing Finance 178 Corporation, the Florida Public Service Commission, and the 179 judicial branch. 180 (2) Describes the processes by which an individual may 181 currently view and verify his or her personal identification information held by an agency, including how an individual may 182 183 request the correction of incorrect personal identification 184 information. (3) Identifies any obstacles that inhibit an individual's 185 186 access to such records. 187 Section 4. Section 429.55, Florida Statutes, is created to 188 read: 189 429.55 Public access to data; comment page.-190 (1) By November 1, 2014, the agency shall provide, 191 maintain, and update at least quarterly, electronically 192 accessible data on assisted living facilities. Such data must be 193 searchable, downloadable, and available in generally accepted 194 formats. At a minimum, such data must include: 195 (a) Information on each assisted living facility licensed 196 under this part, including: 197 1. The name and address of the facility. 198 2. The number and type of licensed beds in the facility. 199 3. The types of licenses held by the facility. 200 4. The facility's license expiration date and status. 201 5. Other relevant information that the agency currently 202 collects. (b) A list of the facility's violations, including, for 203

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585-02904-14 2014782c1 204 each violation: 205 1. A summary of the violation presented in a manner 206 understandable by the general public; 207 2. Any sanctions imposed by final order; and 208 3. The date the corrective action was confirmed by the 209 agency. 210 (c) Links to inspection reports on file with the agency. 211 (2) (a) The agency may provide a monitored comment webpage that allows members of the public to comment on specific 212 213 assisted living facilities licensed to operate in this state. At 214 a minimum, the comment webpage must allow members of the public to identify themselves, provide comments on their experiences 215 with, or observations of, an assisted living facility, and view 216 217 others' comments. 218 (b) The agency shall review comments for profanities and 219 redact any profanities before posting the comments to the 220 webpage. After redacting any profanities, the agency shall post 221 all comments, and shall retain all comments as they were 222 originally submitted, which are subject to the requirements of 223 chapter 119, Florida Statutes, and which shall be retained by 224 the agency for inspection by the public without further 225 redaction pursuant to retention schedules and disposal processes 226 for such records. 227 (c) A controlling interest, as defined in s. 408.803, 228 Florida Statutes, in an assisted living facility, or an employee 229 or owner of an assisted living facility, is prohibited from 230 posting comments on the page. A controlling interest, employee, 231 or owner may respond to comments on the page, and the agency 232 shall ensure that such responses are identified as being from a

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585-02904-14 2014782c1 233 representative of the facility. 234 (3) The agency may provide links to third-party websites 235 that use the data published pursuant to this section to assist 236 consumers in evaluating the quality of care and service in 237 assisted living facilities. 238 (4) The agency may adopt rules to administer this section. 239 Section 5. Section 408.05, Florida Statutes, is amended to 240 read: 241 408.05 Florida Health Information Transparency Initiative 242 Center for Health Information and Policy Analysis.-243 (1) CREATION AND PURPOSE ESTABLISHMENT. - The agency shall 244 create a comprehensive health information system to promote 245 accessibility, transparency, and utility of state-collected data and information about health providers, facilities, services, 246 247 and payment sources. The agency is responsible for making state-248 collected health data available in a manner that allows for and 249 encourages multiple and innovative uses of data sets. Subject to 250 funding by the General Appropriations Act, the agency shall 251 develop and deploy, through a contract award with one or more 252 vendors or internal development, new methods of dissemination 253 and ways to convert data into easily usable electronic formats 254 establish a Florida Center for Health Information and Policy 255 Analysis. The center shall establish a comprehensive health 256 information system to provide for the collection, compilation, 257 coordination, analysis, indexing, dissemination, and utilization 258 of both purposefully collected and extant health-related data 259 and statistics. The center shall be staffed with public health 260 experts, biostatisticians, information system analysts, health policy experts, economists, and other staff necessary to carry 261

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provider.

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585-02904-14 2014782c1 291 (c) (g) Health care costs and financing, including Medicaid 292 claims and encounter data and data from other public and private 293 payors trends in health care prices and costs, the sources of 294 payment for health care services, and federal, state, and local 295 expenditures for health care. 296 (h) Family formation, growth, and dissolution. 297 (d) (i) The extent, source, and type of public and private 298 health insurance coverage in this state. 299 (e) (j) The data necessary for measuring value and quality 300 of care provided by various health care providers, including 301 applicable credentials, accreditation status, use, revenues and expenses, outcomes, site visits, and other regulatory reports, 302 303 and the results of administrative and civil litigation related 304 to health care. 305 (3) COORDINATION COMPREHENSIVE HEALTH INFORMATION SYSTEM.-306 In order to collect comprehensive produce comparable and uniform 307 health information and statistics and to disseminate such information to for the public, as well as for the development of 308 309 policy recommendations, the agency shall perform the following 310 functions: 311 (a) Collect and compile data from all agencies and programs that provide, regulate, and pay for health services Coordinate 312 313 the activities of state agencies involved in the design and 314 implementation of the comprehensive health information system. 315 (b) Promote data sharing through the Undertake research, 316 development, dissemination, and evaluation of state-collected 317 health data and by making such data available, transferable, and 318 readily usable respecting the comprehensive health information 319 system.

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585-02904-14 2014782c1 320 (c) Review the statistical activities of state agencies to ensure that they are consistent with the comprehensive health 321 322 information system. 323 (c) (d) Develop written agreements with local, state, and 324 federal agencies for the sharing of health-care-related data or 325 using the facilities and services of such agencies. State 326 agencies, local health councils, and other agencies under state 327 contract shall assist the agency center in obtaining, compiling, 328 and transferring health-care-related data maintained by state and local agencies. Written agreements must specify the types, 329 330 methods, and periodicity of data exchanges and specify the types 331 of data that will be transferred to the center. 332 (d)(e) Enable and facilitate the sharing and use of all 333 state-collected health data to the maximum extent allowed by law 334 Establish by rule the types of data collected, compiled, 335 processed, used, or shared. Decisions regarding center data sets 336 should be made based on consultation with the State Consumer 337 Health Information and Policy Advisory Council and other public 338 and private users regarding the types of data which should be 339 collected and their uses. The center shall establish 340 standardized means for collecting health information and 341 statistics under laws and rules administered by the agency. 342 (f) Establish minimum health-care-related data sets which are necessary on a continuing basis to fulfill the collection 343 requirements of the center and which shall be used by state 344 345 agencies in collecting and compiling health-care-related data. 346 The agency shall periodically review ongoing health care data 347 collections of the Department of Health and other state agencies to determine if the collections are being conducted in 348

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585-02904-14 2014782c1 349 accordance with the established minimum sets of data. 350 (g) Establish advisory standards to ensure the quality of 351 health statistical and epidemiological data collection, processing, and analysis by local, state, and private 352 353 organizations. 354 (e) (h) Monitor data collection procedures, test data 355 quality, and take such corrective actions as are necessary to 356 ensure that data and information disseminated under the 357 initiative are accurate, valid, reliable, and complete Prescribe 358 standards for the publication of health-care-related data 359 reported pursuant to this section which ensure the reporting of 360 accurate, valid, reliable, complete, and comparable data. Such 361 standards should include advisory warnings to users of the data 362 regarding the status and quality of any data reported by or 363 available from the center. 364 (f) (i) Initiate and maintain activities necessary to 365 collect, edit, verify, archive, and retrieve data compiled 366 pursuant to this section Prescribe standards for the maintenance 367 and preservation of the center's data. This should include 368 methods for archiving data, retrieval of archived data, and data 369 editing and verification. 370 (j) Ensure that strict quality control measures are 371 maintained for the dissemination of data through publications, 372 studies, or user requests. 373 (k) Develop, in conjunction with the State Consumer Health 374 Information and Policy Advisory Council, and implement a long-375 range plan for making available health care quality measures and 376 financial data that will allow consumers to compare health care 377 services. The health care quality measures and financial data

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378	the agency must make available include, but are not limited to,
379	pharmaceuticals, physicians, health care facilities, and health
380	plans and managed care entities. The agency shall update the
381	plan and report on the status of its implementation annually.
382	The agency shall also make the plan and status report available
383	to the public on its Internet website. As part of the plan, the
384	agency shall identify the process and timeframes for
385	implementation, barriers to implementation, and recommendations
386	of changes in the law that may be enacted by the Legislature to
387	eliminate the barriers. As preliminary elements of the plan, the
388	agency shall:
389	1. Make available patient-safety indicators, inpatient
390	quality indicators, and performance outcome and patient charge
391	data collected from health care facilities pursuant to s.
392	408.061(1)(a) and (2). The terms "patient-safety indicators" and
393	"inpatient quality indicators" have the same meaning as that
394	ascribed by the Centers for Medicare and Medicaid Services, an
395	accrediting organization whose standards incorporate comparable
396	regulations required by this state, or a national entity that
397	establishes standards to measure the performance of health care
398	providers, or by other states. The agency shall determine which
399	conditions, procedures, health care quality measures, and
400	patient charge data to disclose based upon input from the
401	council. When determining which conditions and procedures are to
402	be disclosed, the council and the agency shall consider
403	variation in costs, variation in outcomes, and magnitude of
404	variations and other relevant information. When determining
405	which health care quality measures to disclose, the agency:
406	a. Shall consider such factors as volume of cases; average

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407	<pre>patient charges; average length of stay; complication rates;</pre>
408	mortality rates; and infection rates, among others, which shall
409	be adjusted for case mix and severity, if applicable.
410	b. May consider such additional measures that are adopted
411	by the Centers for Medicare and Medicaid Studies, an accrediting
412	organization whose standards incorporate comparable regulations
413	required by this state, the National Quality Forum, the Joint
414	Commission on Accreditation of Healthcare Organizations, the
415	Agency for Healthcare Research and Quality, the Centers for
416	Disease Control and Prevention, or a similar national entity
417	that establishes standards to measure the performance of health
418	care providers, or by other states.
419	
420	When determining which patient charge data to disclose, the
421	agency shall include such measures as the average of
422	undiscounted charges on frequently performed procedures and
423	preventive diagnostic procedures, the range of procedure charges
424	from highest to lowest, average net revenue per adjusted patient
425	day, average cost per adjusted patient day, and average cost per
426	admission, among others.
427	2. Make available performance measures, benefit design, and
428	premium cost data from health plans licensed pursuant to chapter
429	627 or chapter 641. The agency shall determine which health care
430	quality measures and member and subscriber cost data to
431	disclose, based upon input from the council. When determining
432	which data to disclose, the agency shall consider information
433	that may be required by either individual or group purchasers to
434	assess the value of the product, which may include membership
435	satisfaction, quality of care, current enrollment or membership,
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436	coverage areas, accreditation status, premium costs, plan costs,
437	premium increases, range of benefits, copayments and
438	deductibles, accuracy and speed of claims payment, credentials
439	of physicians, number of providers, names of network providers,
440	and hospitals in the network. Health plans shall make available
441	to the agency such data or information that is not currently
442	reported to the agency or the office.
443	3. Determine the method and format for public disclosure of
444	data reported pursuant to this paragraph. The agency shall make
445	its determination based upon input from the State Consumer
446	Health Information and Policy Advisory Council. At a minimum,
447	the data shall be made available on the agency's Internet
448	website in a manner that allows consumers to conduct an
449	interactive search that allows them to view and compare the
450	information for specific providers. The website must include
451	such additional information as is determined necessary to ensure
452	that the website enhances informed decisionmaking among
453	consumers and health care purchasers, which shall include, at a
454	minimum, appropriate guidance on how to use the data and an
455	explanation of why the data may vary from provider to provider.
456	4. Publish on its website undiscounted charges for no fewer
457	than 150 of the most commonly performed adult and pediatric
458	procedures, including outpatient, inpatient, diagnostic, and
459	preventative procedures.
460	(4) TECHNICAL ASSISTANCE
461	(a) The center shall provide technical assistance to
462	persons or organizations engaged in health planning activities
463	in the effective use of statistics collected and compiled by the
464	center. The center shall also provide the following additional
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465	technical assistance services:
466	1. Establish procedures identifying the circumstances under
467	which, the places at which, the persons from whom, and the
468	methods by which a person may secure data from the center,
469	including procedures governing requests, the ordering of
470	requests, timeframes for handling requests, and other procedures
471	necessary to facilitate the use of the center's data. To the
472	extent possible, the center should provide current data timely
473	in response to requests from public or private agencies.
474	2. Provide assistance to data sources and users in the
475	areas of database design, survey design, sampling procedures,
476	statistical interpretation, and data access to promote improved
477	health-care-related data sets.
478	3. Identify health care data gaps and provide technical
479	assistance to other public or private organizations for meeting
480	documented health care data needs.
481	4. Assist other organizations in developing statistical
482	abstracts of their data sets that could be used by the center.
483	5. Provide statistical support to state agencies with
484	regard to the use of databases maintained by the center.
485	6. To the extent possible, respond to multiple requests for
486	information not currently collected by the center or available
487	from other sources by initiating data collection.
488	7. Maintain detailed information on data maintained by
489	other local, state, federal, and private agencies in order to
490	advise those who use the center of potential sources of data
491	which are requested but which are not available from the center.
492	8. Respond to requests for data which are not available in
493	published form by initiating special computer runs on data sets

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585-02904-14 2014782c1 494 available to the center. 495 9. Monitor innovations in health information technology, 496 informatics, and the exchange of health information and maintain 497 a repository of technical resources to support the development 498 of a health information network. 499 (b) The agency shall administer, manage, and monitor grants 500 to not-for-profit organizations, regional health information 501 organizations, public health departments, or state agencies that 502 submit proposals for planning, implementation, or training 503 projects to advance the development of a health information 504 network. Any grant contract shall be evaluated to ensure the 505 effective outcome of the health information project. 506 (c) The agency shall initiate, oversee, manage, and 507 evaluate the integration of health care data from each state 508 agency that collects, stores, and reports on health care issues 509 and make that data available to any health care practitioner 510 through a state health information network. (5) PUBLICATIONS; REPORTS; SPECIAL STUDIES.-The center 511 512 shall provide for the widespread dissemination of data which it 513 collects and analyzes. The center shall have the following 514 publication, reporting, and special study functions: 515 (a) The center shall publish and make available 516 periodically to agencies and individuals health statistics publications of general interest, including health plan consumer 517 518 reports and health maintenance organization member satisfaction 519 surveys; publications providing health statistics on topical 520 health policy issues; publications that provide health status 521 profiles of the people in this state; and other topical health 522 statistics publications.

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585-02904-14 2014782c1 523 (b) The center shall publish, make available, and 524 disseminate, promptly and as widely as practicable, the results 525 of special health surveys, health care research, and health care 526 evaluations conducted or supported under this section. Any 527 publication by the center must include a statement of the 528 limitations on the quality, accuracy, and completeness of the 529 data. 530 (c) The center shall provide indexing, abstracting, translation, publication, and other services leading to a more 531 532 effective and timely dissemination of health care statistics. 533 (d) The center shall be responsible for publishing and 534 disseminating an annual report on the center's activities. 535 (e) The center shall be responsible, to the extent 536 resources are available, for conducting a variety of special 537 studies and surveys to expand the health care information and 538 statistics available for health policy analyses, particularly 539 for the review of public policy issues. The center shall develop a process by which users of the center's data are periodically 540 541 surveyed regarding critical data needs and the results of the 542 survey considered in determining which special surveys or 543 studies will be conducted. The center shall select problems in 544 health care for research, policy analyses, or special data 545 collections on the basis of their local, regional, or state 546 importance; the unique potential for definitive research on the 547 problem; and opportunities for application of the study 548 findings. 549 (4) (6) PROVIDER DATA REPORTING.-This section does not

549 <u>(4)(6)</u> PROVIDER DATA REPORTING.—This section does not 550 confer on the agency the power to demand or require that a 551 health care provider or professional furnish information,

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585-02904-14 2014782c1 552 records of interviews, written reports, statements, notes, 553 memoranda, or data other than as expressly required by law. 554 (5) (7) HEALTH INFORMATION ENTERPRISE BUDGET; FEES.-555 (a) The agency shall implement the comprehensive health 556 information system in a manner that recognizes state-collected 557 data as an asset and rewards taxpayer investment in information 558 collection and management Legislature intends that funding for 559 the Florida Center for Health Information and Policy Analysis be 560 appropriated from the General Revenue Fund. 561 (b) The agency Florida Center for Health Information and 562 Policy Analysis may apply for, and receive, and accept grants, gifts, and other payments, including property and services, from 563 564 a any governmental or other public or private entity or person 565 and make arrangements for as to the use of such funds same, 566 including the undertaking of special studies and other projects 567 relating to health-care-related topics. Funds obtained pursuant 568 to this paragraph may not be used to offset annual 569 appropriations from the General Revenue Fund. 570 (c) The agency shall ensure that a vendor who enters into a 571 contract with the state under this section does not inhibit or 572 impede public access to state-collected health data and 573 information center may charge such reasonable fees for services 574 as the agency prescribes by rule. The established fees may not 575 exceed the reasonable cost for such services. Fees collected may 576 not be used to offset annual appropriations from the General 577 Revenue Fund.

578 (8) STATE CONSUMER HEALTH INFORMATION AND POLICY ADVISORY
 579 COUNCIL.-

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(a) There is established in the agency the State Consumer

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581	Health Information and Policy Advisory Council to assist the
582	center in reviewing the comprehensive health information system,
583	including the identification, collection, standardization,
584	sharing, and coordination of health-related data, fraud and
585	abuse data, and professional and facility licensing data among
586	federal, state, local, and private entities and to recommend
587	improvements for purposes of public health, policy analysis, and
588	transparency of consumer health care information. The council
589	shall consist of the following members:
590	1. An employee of the Executive Office of the Governor, to
591	be appointed by the Governor.
592	2. An employee of the Office of Insurance Regulation, to be
593	appointed by the director of the office.
594	3. An employee of the Department of Education, to be
595	appointed by the Commissioner of Education.
596	4. Ten persons, to be appointed by the Secretary of Health
597	Care Administration, representing other state and local
598	agencies, state universities, business and health coalitions,
599	local health councils, professional health-care-related
600	associations, consumers, and purchasers.
601	(b) Each member of the council shall be appointed to serve
602	for a term of 2 years following the date of appointment, except
603	the term of appointment shall end 3 years following the date of
604	appointment for members appointed in 2003, 2004, and 2005. A
605	vacancy shall be filled by appointment for the remainder of the
606	term, and each appointing authority retains the right to
607	reappoint members whose terms of appointment have expired.
608	(c) The council may meet at the call of its chair, at the
609	request of the agency, or at the request of a majority of its
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610	membership, but the council must meet at least quarterly.
611	(d) Members shall elect a chair and vice chair annually.
612	(c) A majority of the members constitutes a quorum, and the
613	affirmative vote of a majority of a quorum is necessary to take
614	action.
615	(f) The council shall maintain minutes of each meeting and
616	shall make such minutes available to any person.
617	(g) Members of the council shall serve without compensation
618	but shall be entitled to receive reimbursement for per diem and
619	travel expenses as provided in s. 112.061.
620	(h) The council's duties and responsibilities include, but
621	are not limited to, the following:
622	1. To develop a mission statement, goals, and a plan of
623	action for the identification, collection, standardization,
624	sharing, and coordination of health-related data across federal,
625	state, and local government and private sector entities.
626	2. To develop a review process to ensure cooperative
627	planning among agencies that collect or maintain health-related
628	data.
629	3. To create ad hoc issue-oriented technical workgroups on
630	an as-needed basis to make recommendations to the council.
631	(9) APPLICATION TO OTHER AGENCIESNothing in this section
632	shall limit, restrict, affect, or control the collection,
633	analysis, release, or publication of data by any state agency
634	pursuant to its statutory authority, dutics, or
635	responsibilities.
636	Section 6. The Office of Program Policy Analysis and
637	Government Accountability (OPPAGA) shall monitor the Agency for
638	Health Care Administration's implementation of s. 408.05,

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639	Florida Statutes, as amended by this act. No later than 1 year
640	after the agency completes implementation, OPPAGA shall provide
641	a report to the President of the Senate and the Speaker of the
642	House of Representatives containing recommendations regarding
643	the application of data practices made pursuant to s. 408.05,
644	Florida Statutes, to other executive branch agencies.
645	Section 7. For the purpose of incorporating the amendment
646	made by this act to section 257.36, Florida Statutes, in a
647	reference thereto, subsection (8) of section 120.54, Florida
648	Statutes, is reenacted to read:
649	120.54 Rulemaking
650	(8) RULEMAKING RECORDIn all rulemaking proceedings the
651	agency shall compile a rulemaking record. The record shall
652	include, if applicable, copies of:
653	(a) All notices given for the proposed rule.
654	(b) Any statement of estimated regulatory costs for the
655	rule.
656	(c) A written summary of hearings on the proposed rule.
657	(d) The written comments and responses to written comments
658	as required by this section and s. 120.541.
659	(e) All notices and findings made under subsection (4).
660	(f) All materials filed by the agency with the committee
661	under subsection (3).
662	(g) All materials filed with the Department of State under
663	subsection (3).
664	(h) All written inquiries from standing committees of the
665	Legislature concerning the rule.
666	
667	Each state agency shall retain the record of rulemaking as long
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585-02904-14 2014782c1 668 as the rule is in effect. When a rule is no longer in effect, 669 the record may be destroyed pursuant to the records-retention schedule developed under s. 257.36(6). 670 671 Section 8. Subsection (3) of section 20.42, Florida 672 Statutes, is amended to read: 673 20.42 Agency for Health Care Administration.-674 (3) The department is shall be the chief health policy and 675 planning entity for the state. The department is responsible for 676 health facility licensure, inspection, and regulatory 677 enforcement; investigation of consumer complaints related to 678 health care facilities and managed care plans; the implementation of the certificate of need program; the operation 679 680 of the Florida Center for Health Information and Policy 681 Analysis; the administration of the Medicaid program; the 682 administration of the contracts with the Florida Healthy Kids 683 Corporation; the certification of health maintenance 684 organizations and prepaid health clinics as set forth in part 685 III of chapter 641; and any other duties prescribed by statute 686 or agreement. 687 Section 9. Paragraph (c) of subsection (4) of section 688 381.026, Florida Statutes, is amended to read: 689 381.026 Florida Patient's Bill of Rights and 690 Responsibilities.-691 (4) RIGHTS OF PATIENTS.-Each health care facility or 692 provider shall observe the following standards: 693 (c) Financial information and disclosure.-694 1. A patient has the right to be given, upon request, by 695 the responsible provider, his or her designee, or a 696 representative of the health care facility full information and

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585-02904-142014782c1697necessary counseling on the availability of known financial698resources for the patient's health care.6992. A health care provider or a health care facility shall,700upon request, disclose to each patient who is eligible for

701 Medicare, before treatment, whether the health care provider or 702 the health care facility in which the patient is receiving 703 medical services accepts assignment under Medicare reimbursement 704 as payment in full for medical services and treatment rendered 705 in the health care provider's office or health care facility.

706 3. A primary care provider may publish a schedule of 707 charges for the medical services that the provider offers to 708 patients. The schedule must include the prices charged to an 709 uninsured person paying for such services by cash, check, credit 710 card, or debit card. The schedule must be posted in a 711 conspicuous place in the reception area of the provider's office 712 and must include, but is not limited to, the 50 services most 713 frequently provided by the primary care provider. The schedule 714 may group services by three price levels, listing services in 715 each price level. The posting must be at least 15 square feet in 716 size. A primary care provider who publishes and maintains a 717 schedule of charges for medical services is exempt from the 718 license fee requirements for a single period of renewal of a 719 professional license under chapter 456 for that licensure term 720 and is exempt from the continuing education requirements of 721 chapter 456 and the rules implementing those requirements for a 722 single 2-year period.

4. If a primary care provider publishes a schedule of
charges pursuant to subparagraph 3., he or she <u>shall</u> must
continually post it at all times for the duration of active

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585-02904-14 2014782c1 726 licensure in this state when primary care services are provided 727 to patients. If a primary care provider fails to post the 728 schedule of charges in accordance with this subparagraph, the 729 provider shall be required to pay any license fee and comply 730 with any continuing education requirements for which an 731 exemption was received. 732 5. A health care provider or a health care facility shall, 733 upon request, furnish a person, before the provision of medical 734 services, a reasonable estimate of charges for such services. 735 The health care provider or the health care facility shall 736 provide an uninsured person, before the provision of a planned 737 nonemergency medical service, a reasonable estimate of charges 738 for such service and information regarding the provider's or facility's discount or charity policies for which the uninsured 739 740 person may be eligible. Such estimates by a primary care 741 provider must be consistent with the schedule posted under 742 subparagraph 3. To the extent possible, estimates shall, to the 743 extent possible, be written in language comprehensible to an 744 ordinary layperson. Such reasonable estimate does not preclude 745 the health care provider or health care facility from exceeding 746 the estimate or making additional charges based on changes in 747 the patient's condition or treatment needs. 748 6. Each licensed facility not operated by the state shall

748 6. Each licensed facility not operated by the state shall 749 make available to the public on its Internet website or by other 750 electronic means a description of and a link to the performance 751 outcome and financial data that is published by the agency 752 pursuant to s. 408.05(3)(k). The facility shall place in its 753 reception area a notice stating that the in the reception area 754 that such information is available electronically and providing

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755	the <u>facility's</u> website address. The licensed facility may
756	indicate that the pricing information is based on a compilation
757	of charges for the average patient and that each patient's bill
758	may vary from the average depending upon the severity of illness
759	and individual resources consumed. The licensed facility may
760	also indicate that the price of service is negotiable for
761	eligible patients based upon the patient's ability to pay.
762	7. A patient has the right to receive a copy of an itemized
763	bill <u>and</u> upon request. A patient has a right to be given an
764	explanation of charges upon request.
765	Section 10. Subsection (11) of section 395.301, Florida
766	Statutes, is amended to read:
767	395.301 Itemized patient bill; form and content prescribed
768	by the agency
769	(11) Each licensed facility shall make available on its
770	Internet website a link to the performance outcome and financial
771	data that is published by the Agency for Health Care
772	Administration pursuant to s. 408.05(3)(k) . The facility shall
773	place in its reception area a notice stating in the reception
774	area that the information is available electronically and
775	providing the facility's Internet website address.
776	Section 11. Paragraph (e) of subsection (2) of section
777	395.602, Florida Statutes, is amended to read:
778	395.602 Rural hospitals
779	(2) DEFINITIONS.—As used in this part:
780	(e) "Rural hospital" means an acute care hospital licensed
781	under this chapter, having 100 or fewer licensed beds and an
782	emergency room, which is:
783	1. The sole provider within a county with a population
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585-02904-14 2014782c1 784 density of no greater than 100 persons per square mile; 785 2. An acute care hospital, in a county with a population 786 density of no greater than 100 persons per square mile, which is 787 at least 30 minutes of travel time, on normally traveled roads 788 under normal traffic conditions, from any other acute care 789 hospital within the same county; 790 3. A hospital supported by a tax district or subdistrict 791 whose boundaries encompass a population of 100 persons or fewer 792 per square mile; 793 4. A hospital in a constitutional charter county with a population of more than over 1 million persons that has imposed 794 795 a local option health service tax pursuant to law and in an area 796 that was directly impacted by a catastrophic event on August 24, 797 1992, for which the Governor of Florida declared a state of 798 emergency pursuant to chapter 125, and has 120 beds or less that 799 serves an agricultural community with an emergency room utilization of no less than 20,000 visits and a Medicaid 800 801 inpatient utilization rate greater than 15 percent; 802 5. A hospital with a service area that has a population of 803 100 persons or fewer per square mile. As used in this 804 subparagraph, the term "service area" means the fewest number of 805 zip codes that account for 75 percent of the hospital's 806 discharges for the most recent 5-year period, based on 807 information available from the agency's hospital inpatient 808 discharge database in the Florida Center for Health Information 809 and Policy Analysis at the agency; or 810

810 6. A hospital designated as a critical access hospital, as811 defined in s. 408.07.

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585-02904-14 2014782c1 813 Population densities used in this paragraph must be based upon 814 the most recently completed United States census. A hospital 815 that received funds under s. 409.9116 for a quarter beginning no 816 later than July 1, 2002, is deemed to have been and shall 817 continue to be a rural hospital from that date through June 30, 2015, if the hospital continues to have 100 or fewer licensed 818 819 beds and an emergency room, or meets the criteria of 820 subparagraph 4. An acute care hospital that has not previously been designated as a rural hospital and that meets the criteria 821 822 of this paragraph shall be granted such designation upon 823 application, including supporting documentation, to the agency. 824 A hospital that was licensed as a rural hospital during the 825 2010-2011 or 2011-2012 fiscal year shall continue to be a rural 826 hospital from the date of designation through June 30, 2015, if 827 the hospital continues to have 100 or fewer licensed beds and an 828 emergency room. 829 Section 12. Section 395.6025, Florida Statutes, is amended 830 to read:

831 395.6025 Rural hospital replacement facilities.-832 Notwithstanding the provisions of s. 408.036, a hospital defined 833 as a statutory rural hospital in accordance with s. 395.602, or 834 a not-for-profit operator of rural hospitals, is not required to obtain a certificate of need for the construction of a new 835 836 hospital located in a county with a population of at least 15,000 but no more than 18,000 and a density of less than 30 837 838 persons per square mile, or a replacement facility, if provided 839 that the replacement, or new, facility is located within 10 840 miles of the site of the currently licensed rural hospital and 841 within the current primary service area. As used in this

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842	section, the term "service area" means the fewest number of zip
843	codes that account for 75 percent of the hospital's discharges
844	for the most recent 5-year period, based on information
845	available from the <u>Agency for Health Care Administration's</u>
846	hospital inpatient discharge database in the Florida Center for
847	Health Information and Policy Analysis at the Agency for Health
848	Care Administration.
849	Section 13. Subsection (43) of section 408.07, Florida
850	Statutes, is amended to read:
851	408.07 DefinitionsAs used in this chapter, with the
852	exception of ss. 408.031-408.045, the term:
853	(43) "Rural hospital" means an acute care hospital licensed
854	under chapter 395, having 100 or fewer licensed beds and an
855	emergency room, and which is:
856	(a) The sole provider within a county with a population
857	density of no greater than 100 persons per square mile;
858	(b) An acute care hospital, in a county with a population
859	density of no greater than 100 persons per square mile, which is
860	at least 30 minutes of travel time, on normally traveled roads
861	under normal traffic conditions, from another acute care
862	hospital within the same county;
863	(c) A hospital supported by a tax district or subdistrict
864	whose boundaries encompass a population of 100 persons or fewer
865	per square mile;
866	(d) A hospital with a service area that has a population of
867	100 persons or fewer per square mile. As used in this paragraph,
868	the term "service area" means the fewest number of zip codes
869	that account for 75 percent of the hospital's discharges for the
870	most recent 5-year period, based on information available from
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585-02904-14 2014782c1 871 the Agency for Health Care Administration's hospital inpatient 872 discharge database in the Florida Center for Health Information 873 and Policy Analysis at the Agency for Health Care 874 Administration; or 875 (e) A critical access hospital. 876 877 Population densities used in this subsection must be based upon 878 the most recently completed United States census. A hospital 879 that received funds under s. 409.9116 for a quarter beginning no 880 later than July 1, 2002, is deemed to have been and shall 881 continue to be a rural hospital from that date through June 30, 882 2015, if the hospital continues to have 100 or fewer licensed 883 beds and an emergency room, or meets the criteria of s. 884 395.602(2)(e)4. An acute care hospital that has not previously 885 been designated as a rural hospital and that meets the criteria 886 of this subsection shall be granted such designation upon 887 application, including supporting documentation, to the Agency 888 for Health Care Administration. 889 Section 14. Paragraph (a) of subsection (4) of section

889Section 14. Paragraph (a) of subsection (4) of section890408.18, Florida Statutes, is amended to read:

891 408.18 Health Care Community Antitrust Guidance Act; 892 antitrust no-action letter; market-information collection and 893 education.-

(4) (a) Members of the health care community who seek
antitrust guidance may request a review of their proposed
business activity by the Attorney General's office. In
conducting its review, the Attorney General's office may seek
whatever documentation, data, or other material it deems
necessary from the Agency for Health Care Administration, the

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585-02904-14 2014782c1 900 Florida Center for Health Information and Policy Analysis, and 901 the Office of Insurance Regulation of the Financial Services 902 Commission. 903 Section 15. Section 465.0244, Florida Statutes, is amended 904 to read: 905 465.0244 Information disclosure.-Every pharmacy shall make 906 available on its Internet website a link to the performance 907 outcome and financial data that is published by the Agency for 908 Health Care Administration pursuant to s. 408.05(3)(k) and shall 909 place in the area where customers receive filled prescriptions 910 notice that such information is available electronically and the 911 address of its Internet website. 912 Section 16. Subsection (2) of section 627.6499, Florida 913 Statutes, is amended to read: 914 627.6499 Reporting by insurers and third-party 915 administrators.-916 (2) Each health insurance issuer shall make available on 917 its Internet website a link to the performance outcome and 918 financial data that is published by the Agency for Health Care 919 Administration pursuant to s. 408.05(3)(k) and shall include in 920 every policy delivered or issued for delivery to any person in 921 the state or any materials provided as required by s. 627.64725 922 notice that such information is available electronically and the address of its Internet website. 923 924 Section 17. Subsection (7) of section 641.54, Florida 925 Statutes, is amended to read: 926 641.54 Information disclosure.-927 (7) Each health maintenance organization shall make

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available on its Internet website a link to the performance

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929	outcome and financial data that is published by the Agency for
930	Health Care Administration pursuant to s. 408.05(3)(k) and shall
931	include in every policy delivered or issued for delivery to any
932	person in the state or any materials provided as required by s.
933	627.64725 notice that such information is available
934	electronically and the address of its Internet website.
935	Section 18. This act shall take effect July 1, 2014.