

	LEGISLATIVE ACTION	
Senate	•	House
Comm: RCS	•	
11/17/2015	•	
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The Committee on Governmental Oversight and Accountability (Hays) recommended the following:

## Senate Amendment (with title amendment)

Delete lines 52 - 159

and insert:

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(d) The council shall be composed of no more than 13 voting members with technical expertise in cardiac medicine. Members shall be appointed by the State Surgeon General for staggered terms of 4 years. An employee of the department or a contracted consultant paid by the department may not serve as an appointed member or ex officio member of the council. Council members

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shall include the following voting members: 1. Pediatric cardiologists or pediatric cardiovascular surgeons who have been nominated by their respective chief executive officers and approved by the State Surgeon General from the following facilities for as long as such facilities maintain their pediatric certificates of need: a. All Children's Hospital in St. Petersburg; b. Arnold Palmer Hospital for Children in Orlando; c. Joe DiMaggio Children's Hospital in Hollywood; d. Nicklaus Children's Hospital in Miami; e. St. Joseph's Children's Hospital in Tampa; f. University of Florida Health Shands Hospital in Gainesville; g. University of Miami Holtz Children's Hospital in Miami; and h. Wolfson Children's Hospital in Jacksonville. A hospital with a certificate of need for a pediatric cardiac program that meets state and national standards as determined by the council following an onsite visit by a panel from the council shall have one of its pediatric cardiologists or pediatric cardiovascular surgeons who has been nominated by its chief executive officer and approved by the State Surgeon General appointed to the council as a new voting member. The voting privilege of a voting member of the council appointed pursuant to this subparagraph shall be suspended if the facility he or she represents no longer meets state and national standards as adopted by the council. Such individual may remain a member of the council in an advisory capacity but shall

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relinquish voting privileges until his or her facility meets such standards.

- 2. Two physicians at large, not associated with a facility that has a representative appointed as a voting member of the council, who are pediatric cardiologists or subspecialists with special expertise or experience in dealing with children or adults with congenital heart disease. These physicians shall be selected by the State Surgeon General in consultation with the Deputy Secretary for Children's Medical Services and the Director of Children's Medical Services.
- 3. One community physician who has ongoing involvement with and special interest in children with heart disease and who is not associated with a facility represented in subparagraph 1. or one community-based medical internist having experience with adults with congenital heart disease. The community physician shall be selected by the State Surgeon General in consultation with the Deputy Secretary of Children's Medical Services and the Director of the Division of Children's Medical Services.
- (e) The State Surgeon General may appoint nonvoting advisory members to the council in consultation with the Deputy Secretary for Children's Medical Services and the Director of Children's Medical Services. Such members may participate in council discussions and subcommittees created by the council, but may not vote.
- (f) The duties of the council include, but are not limited to:
- 1. Recommending standards for personnel, diagnoses, clinics, and facilities rendering cardiac services to the department and the Division of Children's Medical Services.

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- 2. Analyzing reports on the periodic review of cardiac personnel, diagnoses, clinics, and facilities to determine if established state and national standards for cardiac services are met.
- 3. Making recommendations to the Director of Children's Medical Services as to the approval or disapproval of reviewed cardiac care personnel, diagnoses, clinics, and facilities.
- 4. Making recommendations as to the intervals for reinspection of approved personnel, diagnoses, clinics, and facilities for cardiac care.
- 5. Reviewing and inspecting hospitals upon the request of the hospitals, the department, or the Agency for Health Care Administration to determine if established state and national standards for cardiac services are met.
- 6. Providing input on all aspects of the state's Children's Medical Services cardiac programs, including rulemaking.
- 7. Addressing all components of the care of adults and children with congenital heart disease and children with acquired heart disease, as indicated and appropriate.
- 8. Abiding by the recognized state and national professional standards of care for children with heart disease.
- 9. Making recommendations to the State Surgeon General for legislation and appropriations for children's cardiac services.
- 10. Providing advisory opinions to the Agency for Health Care Administration before the agency approves a certificate of need for children's cardiac services.
- (g) A council member shall serve without compensation, but is entitled to reimbursement for per diem and travel expenses in accordance with s. 112.061.

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- (h) At the recommendation of the Pediatric Cardiac Advisory Council and with the approval of the Director of Children's Medical Services, the State Surgeon General shall designate facilities meeting the council's approved state and national professional standards of care for children with heart disease as "Pediatric and Congenital Cardiovascular Centers of Excellence." The designation is withdrawn automatically if a particular center no longer meets such standards.
- 1. The council shall develop and recommend to the State Surgeon General measurable performance standards and goals for determining whether a facility meets the requirements for designation as a "Pediatric and Congenital Cardiovascular Center of Excellence."
- 2. The council shall develop and recommend to the State Surgeon General evaluation tools for measuring the goals and performance standards of the facilities seeking and receiving the "Pediatric and Congenital Cardiovascular Center of Excellence" designation.
- (3) ANNUAL REPORT.—The council shall submit an annual report to the Governor, the President of the Senate, the Speaker of the House of Representatives, and the State Surgeon General by January 1 of each year, beginning in 2017. The report must summarize the council's activities for the preceding fiscal year and include data and performance measures for all pediatric cardiac facilities that participate in the Children's Medical Services Network relating to surgical morbidity and mortality. The report must also recommend any policy or procedural changes that would increase the council's effectiveness in monitoring the pediatric cardiovascular programs in the state.

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(4) RULEMAKING.—The department, in coordination with the Agency for Health Care Administration, shall develop rules related to pediatric cardiac facilities that participate in the Children's Medical Services Network. The rules may establish standards relating to the training and credentialing of medical and surgical personnel, facility and physician minimum case volumes, and data reporting requirements for monitoring and enhancing quality assurance. The department may adopt rules relating to the establishment, operations, and authority of the Pediatric Cardiac Advisory Council and the establishment, goals, performance standards, and evaluation tools for designating facilities as Pediatric and Congenital Cardiovascular Centers of Excellence. The rules relating to pediatric cardiac services and facilities in effect on October 1, 2015, are authorized pursuant to this subsection and shall remain in effect until amended pursuant to this subsection. Section 2. This act shall take effect upon becoming a law. ========= T I T L E A M E N D M E N T =========== And the title is amended as follows: Delete lines 2 - 17 and insert: An act relating to pediatric cardiac care in the Children's Medical Services Network; creating s. 391.224, F.S.; providing legislative findings and intent; creating the Pediatric Cardiac Advisory Council; determining the chair of the advisory council; establishing the membership of the advisory

council; identifying the duties of the advisory

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council; setting the minimum qualifications for the designation of a facility as a Pediatric and Congenital Cardiovascular Center of Excellence; requiring a report to the Governor, the Legislature, and the State Surgeon General; requiring the Department of Health to develop rules relating to pediatric cardiac services and facilities in the Children's Medical Services Network; authorizing the department to adopt rules relating to the council and the designation of facilities as Pediatric and Congenital Cardiovascular Centers of Excellence; authorizing and preserving until amended specified rules relating to pediatric cardiac services and facilities; providing an effective date.