

	LEGISLATIVE ACTION	
Senate		House
Comm: RCS		
02/01/2018		
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The Committee on Appropriations (Bean) recommended the following:

Senate Amendment (with directory and title amendments)

Between lines 921 and 922 insert:

- (9) The agency shall establish a technical advisory panel, pursuant to s. 20.052, to develop procedures and standards for measuring outcomes of pediatric cardiac catheterization programs and pediatric cardiovascular open-heart surgery programs.
- (a) Members of the panel must have technical expertise in pediatric cardiac medicine and shall serve without compensation

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and shall not be reimbursed for per diem and travel expenses. composed

- (b) Voting members of the panel shall include: 3 at-large members, including 1 cardiologist who is board certified in caring for adults with congenital heart disease and 2 boardcertified pediatric cardiologists, neither of whom may be employed by any of the hospitals specified in subparagraphs 1 .-10. or their affiliates, each of whom is appointed by the Secretary of Health Care Administration, and 10 members, and an alternate for each member, each of whom is a pediatric cardiologist or a pediatric cardiovascular surgeon, each appointed by the chief executive officer of one of the following hospitals:
 - 1. Johns Hopkins All Children's Hospital in St. Petersburg.
 - 2. Arnold Palmer Hospital for Children in Orlando.
 - 3. Joe DiMaggio Children's Hospital in Hollywood.
 - 4. Nicklaus Children's Hospital in Miami.
 - 5. St. Joseph's Children's Hospital in Tampa.
- 6. University of Florida Health Shands Hospital in Gainesville.
 - 7. University of Miami Holtz Children's Hospital in Miami.
 - 8. Wolfson Children's Hospital in Jacksonville.
 - 9. Florida Hospital for Children in Orlando.
 - 10. Nemours Children's Hospital in Orlando.

Appointments made under subparagraphs 1.-10. are contingent upon the hospital's maintenance of pediatric certificates of need and the hospital's compliance with this section and rules adopted thereunder, as determined by the Secretary of Health Care



40 Administration. A member appointed under subparagraphs 1.-10. 41 whose hospital fails to maintain such certificates or comply 42 with standards may serve only as a nonvoting member until the 43 hospital restores such certificates or complies with such 44 standards.

- (c) The Secretary of Health Care Administration may appoint nonvoting members to the panel. Nonvoting members may include:
 - 1. The Secretary of Health Care Administration.
 - 2. The Surgeon General.

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- 3. The Deputy Secretary of Children's Medical Services.
- 4. Any current or past Division Director of Children's Medical Services.
 - 5. A parent of a child with congenital heart disease.
 - 6. An adult with congenital heart disease.
- 7. A representative from each of the following organizations: the Florida Chapter of the American Academy of Pediatrics, the Florida Chapter of the American College of Cardiology, the Greater Southeast Affiliate of the American Heart Association, the Adult Congenital Heart Association, the March of Dimes, the Florida Association of Children's Hospitals, and the Florida Society of Thoracic and Cardiovascular Surgeons.
- (d) The panel shall meet biannually, or more frequently upon the call of the Secretary of Health Care Administration. Such meetings may be conducted telephonically, or by other electronic means.
- (e) The duties of the panel include recommending to the agency standards for quality of care, personnel, physical plant, equipment, emergency transportation, and data reporting for hospitals that provide pediatric cardiac services.

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- (f) Beginning in January 1, 2020, and annually thereafter, the panel shall submit a report to the Governor, the President of the Senate, the Speaker of the House of Representatives, the Secretary of Health Care Administration, and the State Surgeon General. The report must summarize the panel's activities during the preceding fiscal year and include data and performance measures on surgical morbidity and mortality for all pediatric cardiac programs.
- (b) Based on the recommendations of the panel, the agency shall develop and adopt rules for pediatric cardiac catheterization programs and pediatric open-heart surgery programs which include at least the following:
- 1. A risk adjustment procedure that accounts for the variations in severity and case mix found in hospitals in this state;
- 2. Outcome standards specifying expected levels of performance in pediatric cardiac programs. Such standards may include, but are not limited to, in-hospital mortality, infection rates, nonfatal myocardial infarctions, length of postoperative bleeds, and returns to surgery; and
- 3. Specific steps to be taken by the agency and licensed facilities that do not meet the outcome standards within a specified time, including time required for detailed case reviews and development and implementation of corrective action plans.
 - (c) This subsection is repealed on July 1, 2022.
- (10) Based on the recommendations of the advisory panel in subsection (9), the agency shall adopt rules for pediatric cardiac programs that, at a minimum, include:



- 98 (a) Standards for pediatric cardiac catheterization 99 services and pediatric cardiovascular surgery including quality of care, personnel, physical plant, equipment, emergency 100 101 transportation, data reporting, and appropriate operating hours 102 and timeframes for mobilization for emergency procedures. 103 (b) Outcome standards consistent with nationally 104 established levels of performance in pediatric cardiac programs. 105 (c) Specific steps to be taken by the agency and licensed 106 facilities when the facilities do not meet the outcome standards 107 within a specified time, including time required for detailed 108 case reviews and development and implementation of corrective 109 action plans. 110 (11) A pediatric cardiac program shall: 111 (a) Be located in a hospital licensed under this chapter 112 and include the following co-located components: a pediatric cardiology clinic, a pediatric cardiac catheterization 113 114 laboratory, and a pediatric cardiovascular surgery program. 115 (b) Have a risk adjustment surgical procedure protocol following the guidelines established by the Society of Thoracic 116 117 Surgeons. 118 (c) Have quality assurance and quality improvement 119 processes in place to enhance clinical operation and patient 120 satisfaction with services. 121 (d) Participate in the clinical outcome reporting systems 122 operated by the Society of Thoracic Surgeons and the American
 - College of Cardiology.
 - (12) (10) The agency may adopt rules to administer the requirements of part II of chapter 408.
 - Section 32. Paragraph (k) is added to subsection (3) of

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127 section 408.05, Florida Statutes, to read: 128 408.05 Florida Center for Health Information and 129 Transparency.-130 (3) HEALTH INFORMATION TRANSPARENCY.—In order to 131 disseminate and facilitate the availability of comparable and 132 uniform health information, the agency shall perform the 133 following functions: (k) Contract with the Society of Thoracic Surgeons and the 134 135 American College of Cardiology to obtain data reported pursuant 136 to s. 395.1055 for publication on the agency's website in a 137 manner that will allow consumers to be informed of aggregate 138 data and to compare pediatric cardiac programs. 139 140 ===== D I R E C T O R Y C L A U S E A M E N D M E N T ====== 141 And the directory clause is amended as follows: 142 Delete lines 888 - 890 143 and insert: 144 Section 31. Present subsection (10) of section 395.1055, 145 Florida Statutes, is redesignated as subsection (12), 146 subsections (2), (3), and (9) of that section are amended, 147 paragraph (i) is added to subsection (1) of that section, and a new subsection (10) and subsection (11) are added to that 148 149 section, to read: 150 151 ======== T I T L E A M E N D M E N T ========== 152 And the title is amended as follows: 153 Delete line 43 154 and insert: 155 nursing units; requiring the agency to adopt rules

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establishing standards for pediatric cardiac catheterization and pediatric cardiovascular surgery programs located in licensed hospitals; providing requirements for such programs; establishing minimum standards for rules for such pediatric cardiac programs; requiring hospitals with pediatric cardiac programs to participate in the clinical outcome reporting systems; revising duties and membership of the pediatric cardiac technical advisory panel; amending s. 408.05, F.S.; requiring the agency to contract with the Society of Thoracic Surgeons and the American College of Cardiology for collection of certain data for publication on the agency's website for certain purposes; repealing ss. 395.10971 and 395.10972,