Florida Senate - 2004

By Senator Atwater

25-846B-04

1	A bill to be entitled
2	An act relating to trauma care services;
3	amending s. 395.40, F.S.; providing that it is
4	the Legislature's intent that the Agency for
5	Health Care Administration be primarily
6	responsible for funding a statewide system of
7	trauma care; requiring that the state trauma
8	care plan be amended by a specified date;
9	amending s. 395.4001, F.S.; revising terms
10	relating to trauma care services; amending s.
11	395.401, F.S.; removing the term
12	"state-approved" from the trauma care services
13	system; amending s. 395.4015, F.S.; requiring
14	the Department of Health and the agency to
15	establish trauma care regions; amending s.
16	395.402, F.S.; requiring the department and the
17	agency to consider the recommendations of
18	certain organizations when reassigning trauma
19	service areas; requiring that the trauma
20	service areas be reviewed periodically;
21	removing limitation on number of trauma centers
22	in the state; amending s. 395.4025, F.S.;
23	conforming provisions to changes made by the
24	act; amending s. 395.403, F.S.; directing that
25	each trauma center receive a one-time specified
26	appropriation in recognition of the capital
27	investment made to establish the trauma
28	service; requiring that each new trauma center
29	also receive a specified appropriation;
30	deleting provisions relating to state-sponsored
31	trauma centers; deleting provisions relating to
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1	client eligibility, funding formulas, and
2	claims processing; creating s. 395.4033, F.S;
3	requiring the department to make certain
4	payments to trauma centers; providing
5	conditions for a certified trauma center to
6	receive funding; creating s. 395.4036, F.S.;
7	requiring the department to use funds from the
8	Trauma Services Trust Fund to assure the
9	availability and accessibility of trauma
10	services throughout this state and for startup
11	costs; requiring the department to allocate
12	funds not disbursed for trauma preparedness and
13	startup costs to trauma centers to pay for
14	uncompensated trauma care; allocating unspent
15	funds to the department's Nursing Student Loan
16	Forgiveness Program and the Nursing Scholarship
17	Program; amending s. 395.4045, F.S.; conforming
18	provisions to changes made by the act;
19	requiring the Medicaid Disproportionate Share
20	Task Force to review the disbursement of
21	Special Medicaid Payments made to trauma
22	centers to assess the effectiveness of the
23	payments to the trauma care centers; requiring
24	the task force to consider the advice and
25	suggestions of specified organizations;
26	amending s. 316.066, F.S.; directing the
27	Department of Highway Safety and Motor Vehicles
28	to collect a fee for each written report of a
29	crash filed with the department; amending s.
30	318.18, F.S.; directing the clerk of court to
31	collect a fee for each civil and criminal

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1	violation of chapter 316, F.S.; amending s.
2	320.0801, F.S.; directing that an additional
3	surcharge be imposed on license registration
4	for certain motor vehicles; amending s. 327.35,
5	F.S.; directing that an additional surcharge be
6	imposed on persons convicted of boating under
7	the influence; creating s. 327.732, F.S.;
8	directing the court to collect an additional
9	fee for criminal and noncriminal violations of
10	chapter 327 or chapter 328, F.S.; providing
11	that all fees collected under the act be
12	deposited in the Trauma Services Trust Fund;
13	creating the driver's responsibility program;
14	directing the Department of Highway Safety and
15	Motor Vehicles to annually impose specified
16	monetary penalties against motor vehicle
17	licensees who have violated certain laws within
18	the previous 36 months; requiring the
19	department to notify licensees of the penalty
20	and the time period in which to pay the
21	penalty; requiring the department to accept
22	installment payments for the penalties;
23	directing the department to adopt rules
24	relating to installment payments; providing
25	sanctions for a licensee's failure to pay an
26	installment; allowing the department the
27	discretion to permit licensees to pay assessed
28	penalties with credit cards; authorizing the
29	department to adopt rules relating to credit
30	card payments; requiring the department to
31	suspend a driver's license if a credit card
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issuer returns the account as unpayable; requiring the department to suspend a driver's license if the licensee does not pay the penalty or arrange for an installment plan within a specified time after the notice of penalty is sent; directing the department to remit all penalties to the Trauma Service Trust Fund; providing an effective date. Be It Enacted by the Legislature of the State of Florida: Section 1. Section 395.40, Florida Statutes, is amended to read: 395.40 Legislative findings and intent.--14 (1) The Legislature finds that there has been a lack of timely access to trauma care due to the state's fragmented trauma system. This finding is based on the 1999 Trauma System Report on Timely Access to Trauma Care submitted by the department in response to the request of the Legislature. The Legislature finds that it is necessary to plan (2) for, and to establish, and fund an inclusive trauma system to meet the needs of trauma victims. An "inclusive trauma system" means a system designed to meet the needs of all injured trauma victims who require care in an acute-care setting and into which every health care provider or facility with resources to care for the injured trauma victim is 26 incorporated. The Legislature deems the benefits of trauma care provided within an inclusive trauma system to be of vital 29 significance to the outcome of a trauma victim.

30 (3) It is the intent of the Legislature to place 31 primary responsibility for the planning and establishment of a

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1 statewide inclusive trauma system with the department and primary responsibility for funding with the agency. The 2 3 department shall undertake the implementation of a statewide inclusive trauma system as funding is available. 4 5 (4) The Legislature finds that significant benefits 6 are to be obtained by directing the coordination of activities 7 by several state agencies, relative to access to trauma care 8 and the provision of trauma care to all trauma victims. It is 9 the intent of the Legislature that the department, the Agency 10 for Health Care Administration, the Board of Medicine, and the 11 Board of Nursing establish interagency teams and agreements for the development of guidelines, standards, and rules for 12 13 those portions of the inclusive state trauma system within the statutory authority of each agency. This coordinated approach 14 will provide the necessary continuum of care for the trauma 15 victim from injury to final hospital discharge. The department 16 17 has the leadership responsibility for this activity. 18 (5) In addition, the agencies listed in subsection (4) 19 should undertake to: 20 (a) Establish a coordinated methodology for monitoring, evaluating, and enforcing the requirements of the 21 state's inclusive trauma system which recognizes the interests 22 23 of each agency. 24 (b) Develop appropriate roles for trauma agencies, to 25 assist in furthering the operation of trauma systems at the regional level. This should include issues of system 26 27 evaluation as well as managed care. 28 (c) Develop and submit appropriate requests for 29 waivers of federal requirements which will facilitate the 30 delivery of trauma care. 31 5

1 (d) Develop criteria that will become the future basis 2 for mandatory consultation on the care of trauma victims and 3 mandatory transfer of appropriate trauma victims to trauma 4 centers. 5 (e) Develop a coordinated approach to the care of the 6 trauma victim. This shall include the movement of the trauma 7 victim through the system of care and the identification of medical responsibility for each phase of care for 8 9 out-of-hospital and in-hospital trauma care. 10 (f) Require the medical director of an emergency 11 medical services provider to have medical accountability for a trauma victim during interfacility transfer. 12 (6) Furthermore, the Legislature encourages the 13 department to actively foster the provision of trauma care and 14 serve as a catalyst for improvements in the process and 15 outcome of the provision of trauma care in an inclusive trauma 16 17 system. Among other considerations, the department is encouraged to: 18 19 (a) Promote the development of at least one trauma 20 center in every trauma service area. (b) Promote the development of a trauma agency for 21 22 each trauma region. Update the state trauma system plan by December 23 (C) 24 2004 2000 and at least every 5th year thereafter. 25 Section 2. Section 395.4001, Florida Statutes, is amended to read: 26 27 395.4001 Definitions.--As used in this part, the term: 28 "Agency" means the Agency for Health Care (1)29 Administration. 30 "Charity care" or "uncompensated charity care" (2) 31 means that portion of hospital charges reported to the agency 6

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1 for which there is no compensation for care provided to a 2 patient whose family income for the 12 months preceding the 3 determination is less than or equal to 200 150 percent of the 4 federal poverty level, unless the amount of hospital charges 5 due from the patient exceeds 25 percent of the annual family б income. However, in no case shall the hospital charges for a 7 patient whose family income exceeds four times the federal 8 poverty level for a family of four be considered charity. 9 (3) "Department" means the Department of Health. 10 (4) "Interfacility trauma transfer" means the transfer 11 of a trauma victim between two facilities licensed under this chapter, under pursuant to this part. 12 13 (5) "Level I trauma center" means a trauma center that: 14 (a) Has formal research and education programs for the 15 enhancement of trauma care and is determined by the department 16 17 to be in substantial compliance with Level I trauma center and pediatric trauma referral center standards. 18 19 (b) Serves as a resource facility to Level II trauma 20 centers, pediatric trauma referral centers, and general 21 hospitals through shared outreach, education, and quality 22 improvement activities. (c) Participates in an inclusive system of trauma 23 24 care, including providing leadership, system evaluation, and 25 quality improvement activities. "Level II trauma center" means a trauma center 26 (6) 27 that: 28 Is determined by the department to be in (a) 29 substantial compliance with Level II trauma center standards. 30 31

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1 (b) Serves as a resource facility to general hospitals 2 through shared outreach, education, and quality improvement 3 activities. 4 (c) Participates in an inclusive system of trauma 5 care. б (7) "Pediatric trauma referral center" means a 7 hospital that is determined by the department to be in 8 substantial compliance with pediatric trauma referral center 9 standards as established by rule of the department. 10 (8) "State-approved Trauma center" means a hospital 11 that has successfully completed the selection process pursuant to s. 395.4025 and has been approved by the department to 12 13 operate as a trauma center in the state. 14 (9) "State-sponsored trauma center" means a trauma 15 center or pediatric trauma referral center that receives state funding for trauma care services under s. 395.403. 16 17 (9)(10) "Trauma agency" means a department-approved 18 agency established and operated by one or more counties, or a 19 department-approved entity with which one or more counties 20 contract, for the purpose of administering an inclusive 21 regional trauma system. (10)(11) "Trauma alert victim" means a person who has 22 incurred a single or multisystem injury due to blunt or 23 24 penetrating means or burns, who requires immediate medical intervention or treatment, and who meets one or more of the 25 adult or pediatric scorecard criteria established by the 26 27 department by rule. 28 (12) "Trauma center" means any hospital that has been 29 determined by the department to be in substantial compliance 30 with trauma center verification standards as either 31 state-approved or provisional state-approved. 8

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1	(11) (13) "Trauma scorecard" means a statewide
2	methodology adopted by the department by rule under which a
3	person who has incurred a traumatic injury is graded as to the
4	severity of his or her injuries or illness and which
5	methodology is used as the basis for making destination
6	decisions.
7	<u>(12)(14) "Trauma transport protocol" means a document</u>
8	which describes the policies, processes, and procedures
9	governing the dispatch of vehicles, the triage, prehospital
10	transport, and interfacility trauma transfer of trauma
11	victims.
12	(13) (15) "Trauma victim" means any person who has
13	incurred a single or multisystem injury due to blunt or
14	penetrating means or burns and who requires immediate medical
15	intervention or treatment.
16	Section 3. Section 395.401, Florida Statutes, is
17	amended to read:
18	395.401 Trauma services system plans; verification of
19	trauma centers and pediatric trauma referral centers;
20	procedures; renewal
21	(1)(a) The local and regional trauma agencies shall
22	plan, implement, and evaluate trauma services systems, in
23	accordance with this section and ss. 395.4015, 395.404, and
24	395.4045, which consist of organized patterns of readiness and
25	response services based on public and private agreements and
26	operational procedures. The department shall establish, by
27	rule, processes and procedures for establishing a trauma
28	agency and obtaining its approval from the department.
29	(b) The local and regional trauma agencies shall
30	develop and submit to the department plans for local and
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1 regional trauma services systems. The plans must include, at a 2 minimum, the following components: 3 The organizational structure of the trauma system. 1. 4 2. Prehospital care management guidelines for triage 5 and transportation of trauma cases. б 3. Flow patterns of trauma cases and transportation system design and resources, including air transportation 7 8 services, provision for interfacility trauma transfer, and the 9 prehospital transportation of trauma victims. The trauma 10 agency shall plan for the development of a system of 11 transportation of trauma alert victims to trauma centers where the distance or time to a trauma center or transportation 12 resources diminish access by trauma alert victims. 13 The number and location of needed state-approved 14 4. 15 trauma centers based on local needs, population, and location and distribution of resources. 16 17 5. Data collection regarding system operation and 18 patient outcome. 19 6. Periodic performance evaluation of the trauma 20 system and its components. 21 7. The use of air transport services within the jurisdiction of the local trauma agency. 22 8. Public information and education about the trauma 23 24 system. 25 9. Emergency medical services communication system usage and dispatching. 26 27 The coordination and integration between and among 10. 28 trauma centers the verified trauma care facility and other the 29 nonverified health care facilities. 30 11. Medical control and accountability. 31 12. Quality control and system evaluation. 10

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1 (c) The department shall receive plans for the 2 implementation of inclusive trauma systems from trauma 3 The department may approve or not approve trauma agencies. agency plans based on the conformance of the plan with this 4 5 section and ss. 395.4015, 395.404, and 395.4045 and the rules 6 and definitions adopted by the department under pursuant to 7 those sections. The department shall approve or disapprove 8 the plans within 120 days after the date the plans are 9 submitted to the department. The department shall, by rule, 10 provide an application process for establishing a trauma 11 agency. The application must, at a minimum, provide requirements for the trauma agency plan submitted for review, 12 13 a process for reviewing the application for a state-approved 14 trauma agency, a process for reviewing the trauma transport protocols for the trauma agency, and a process for reviewing 15 the staffing requirements for the agency. The department 16 17 shall, by rule, establish minimum requirements for a trauma 18 agency to conduct an annual performance evaluation and submit 19 the results to the department. 20 (d) A trauma agency shall not operate unless the 21 department has approved the local or regional trauma services 22 system plan of the agency. 23 (e) The department may grant an exception to a portion 24 of the rules adopted under pursuant to this section or s. 25 395.4015 if the local or regional trauma agency proves that, as defined in the rules, compliance with that requirement 26 27 would not be in the best interest of the persons served within 28 the affected local or regional trauma area. 29 (f) A local or regional trauma agency may implement a 30 trauma care system only if the system meets the minimum 31 standards set forth in the rules for implementation 11

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established by the department and if the plan has been submitted to, and approved by, the department. At least 60 days before the local or regional trauma agency submits the plan for the trauma care system to the department, the local

5 or regional trauma agency shall hold a public hearing and give 6 adequate notice of the public hearing to all hospitals and 7 other interested parties in the area to be included in the 8 proposed system.

9 (g) Local or regional trauma agencies may enter into 10 contracts for the purpose of implementing the local or 11 regional plan. If local or regional agencies contract with 12 hospitals for trauma services, such agencies must contract 13 only with hospitals which are verified trauma centers.

(h) Local or regional trauma agencies providing
service for more than one county shall, as part of their
formation, establish interlocal agreements between or among
the several counties in the regional system.

(i) This section does not restrict the authority of a
health care facility to provide service for which it has
received a license under pursuant to this chapter.

(j) Any hospital which is verified as A trauma center
shall accept all trauma victims that are appropriate for the
facility regardless of race, sex, creed, or ability to pay.

(k) It is unlawful for any hospital or other facility
to hold itself out as a trauma center unless it has been so
verified.

(1) A county, upon the recommendations of the local or regional trauma agency, may adopt ordinances governing the transport of a patient who is receiving care in the field from prehospital emergency medical personnel when the patient meets specific criteria for trauma, burn, or pediatric centers

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1 adopted by the local or regional trauma agency. These ordinances must be consistent with s. 395.4045, ordinances 2 3 adopted under s. 401.25(6), and the local or regional trauma 4 system plan and, to the furthest possible extent, must ensure 5 that individual patients receive appropriate medical care б while protecting the interests of the community at large by 7 making maximum use of available emergency medical care 8 resources.

9 (m) The local or regional trauma agency shall, 10 consistent with the regional trauma system plan, coordinate 11 and otherwise facilitate arrangements necessary to develop a 12 trauma services system.

(n) After the submission of the initial trauma system
plan, each trauma agency shall, every 5th year, submit to the
department for approval an updated plan that identifies the
changes, if any, to be made in the regional trauma system.
(o) This section does not preclude a local or regional

18 trauma agency from adopting trauma care system standards.
19 Section 4. Subsections (1) and (2) of section

20 395.4015, Florida Statutes, are amended to read:

21 395.4015 State regional trauma planning; trauma 22 regions.--

23 The department, in conjunction with the agency, (1)24 shall establish a state trauma system plan. As part of the 25 state trauma system plan, the department and the agency shall establish trauma regions that which cover all geographical 26 27 areas of the state. These regions may serve as the basis for 28 the development of department-approved local or regional 29 trauma plans. The department and the agency shall base their its definition of the regions upon: 30 31

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1 (a) Geographical considerations so as to ensure rapid 2 access to trauma care by patients; 3 Historical patterns of patient referral and (b) transfer in an area; 4 5 Inventories of available trauma care resources; (C) б Predicted population growth characteristics; (d) 7 Transportation capabilities, including ground and (e) 8 air transport; 9 (f) Medically appropriate ground and air travel times; 10 and 11 Other appropriate criteria. (q) The department shall develop trauma systems plans 12 (2) 13 for the agency and department-defined trauma regions which include at a minimum the following components: 14 (a) An assessment of current and future trauma care 15 needs of the population, based upon incidence rates and acuity 16 17 indicators developed by the department and the agency, as well as other relevant characteristics of the region. 18 19 (b) The organizational structure of the regional 20 trauma system, including the identification of local trauma agency service areas within the region. 21 22 (c) Prehospital care management guidelines for triage 23 and transportation of trauma cases. 24 (d) Flow patterns of trauma cases and transportation 25 system design and resources, including air transportation services, provision for interfacility trauma transfer, and the 26 27 prehospital transportation of trauma victims. The department 28 shall plan for the development of a system of transportation 29 of trauma alert victims to trauma centers where the distance or time to a trauma center or transportation resources 30 31 diminish access by trauma alert victims.

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1	(e) The current and projected number, acuity level,
2	and geographic location of trauma cases expected so as to
3	assure that the assessed current and future trauma care needs
4	of the population are adequately met and that state-sponsored
5	trauma centers will maintain the volume of cases sufficient to
б	provide quality care to trauma cases referred to them.
7	(f) The availability of qualified health
8	professionals, including physicians and surgeons, capable of
9	staffing trauma centers to the level of current and future
10	assessed needs.
11	(g) Data collection regarding system operation and
12	patient outcome, as well as the number, type, and generalized
13	locations of state-sponsored trauma centers needed to meet the
14	needs of the population.
15	(h) Periodic performance evaluation of the trauma
16	system and its components.
17	(i) The type and extent of air transport services
18	available and needed in each region.
19	(j) Public information and education about the trauma
20	system.
21	(k) Emergency medical services communication system
22	usage and dispatching.
23	(1) The coordination and integration between the
24	trauma centers and other health care facilities which may
25	provide services to trauma victims.
26	(m) Medical control and accountability.
27	(n) Quality management and system evaluation.
28	Section 5. Section 395.402, Florida Statutes, is
29	amended to read:
30	395.402 Trauma service areas; number and location of
31	trauma centers
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1 (1) The Legislature recognizes that Level I and Level 2 II trauma centers should each be capable of annually treating 3 a minimum of 1,000 and 500 patients, respectively, with an injury severity score (ISS) of 9 or greater. Further, the 4 5 Legislature finds that, based on the numbers and locations of 6 trauma victims with these injury severity scores, there should 7 be 19 trauma service areas should be established in the state, 8 and, at a minimum, there should be at least one trauma center in each service area. 9

10 (2) It is the intent of the Legislature that, as a 11 planning guideline, Level I and Level II trauma centers should 12 generally each provide care annually to a minimum of 1,000 and 13 500 patients, respectively. Level II trauma centers in 14 counties of more than 500,000 population are expected to be 15 able to care for 1,000 patients per year, as a planning 16 guideline.

17 (3) Trauma service areas are to be used. The 18 department shall periodically review the assignment of the 67 19 counties to trauma service areas. These assignments are made 20 for the purpose of developing a system of trauma centers. 21 Revisions made by the department should take into consideration the recommendations made as part of the regional 22 trauma system plans approved by the department, as well as the 23 24 recommendations made as part of the state trauma system plan, 25 and the recommendations made by the Alliance and the Committee on Trauma. These areas must, at a minimum, be reviewed in the 26 year 2004 2000 and every 5 years thereafter. Until the 27 28 department completes its initial review, the assignment of 29 counties shall remain as established under pursuant to chapter 30 90-284, Laws of Florida.

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1 (a) The following trauma service areas are hereby 2 established: 3 1. Trauma service area 1 shall consist of Escambia, 4 Okaloosa, Santa Rosa, and Walton Counties. 5 Trauma service area 2 shall consist of Bay, Gulf, 2 б Holmes, and Washington Counties. 7 Trauma service area 3 shall consist of Calhoun, 3. 8 Franklin, Gadsden, Jackson, Jefferson, Leon, Liberty, Madison, 9 Taylor, and Wakulla Counties. 10 4. Trauma service area 4 shall consist of Alachua, 11 Bradford, Columbia, Dixie, Gilchrist, Hamilton, Lafayette, Levy, Putnam, Suwannee, and Union Counties. 12 13 5. Trauma service area 5 shall consist of Baker, Clay, Duval, Nassau, and St. Johns Counties. 14 Trauma service area 6 shall consist of Citrus, 15 6. Hernando, and Marion Counties. 16 17 7. Trauma service area 7 shall consist of Flagler and 18 Volusia Counties. 19 8. Trauma service area 8 shall consist of Lake, Orange, Osceola, Seminole, and Sumter Counties. 20 21 9. Trauma service area 9 shall consist of Pasco and Pinellas Counties. 22 10. Trauma service area 10 shall consist of 23 24 Hillsborough County. 25 11. Trauma service area 11 shall consist of Hardee, Highlands, and Polk Counties. 26 27 12. Trauma service area 12 shall consist of Brevard and Indian River Counties. 28 29 13. Trauma service area 13 shall consist of DeSoto, 30 Manatee, and Sarasota Counties. 31 17

1 14. Trauma service area 14 shall consist of Martin, 2 Okeechobee, and St. Lucie Counties. 3 15. Trauma service area 15 shall consist of Charlotte, 4 Glades, Hendry, and Lee Counties. 5 Trauma service area 16 shall consist of Palm Beach 16. б County. 7 Trauma service area 17 shall consist of Collier 17. 8 County. Trauma service area 18 shall consist of Broward 9 18. 10 County. 11 19. Trauma service area 19 shall consist of Dade and Monroe Counties. 12 13 (b) Each trauma service area should have at least one Level I or Level II trauma center. The department shall 14 allocate, by rule, the number of trauma centers needed for 15 each trauma service area. 16 17 (c) There shall be no more than a total of 44 state-sponsored trauma centers in the state. 18 19 Section 6. Section 395.4025, Florida Statutes, is 20 amended to read: 21 395.4025 State-approved Trauma centers; selection; 22 quality assurance; records. --(1) For purposes of developing a system of 23 24 state-approved trauma centers, the department shall use the 19 trauma service areas established in s. 395.402. Within each 25 service area and based on the state trauma system plan, the 26 local or regional trauma services system plan, and 27 28 recommendations of the local or regional trauma agency, and 29 the 1990 Report and Proposal for Funding State-Sponsored Trauma Centers, the department shall establish the approximate 30 31 number of state-approved trauma centers needed to ensure 18

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reasonable access to high-quality trauma services. Using the

guidelines and procedures outlined in the 1990 report, except when in conflict with those prescribed in this section, the department shall select those hospitals that are to be recognized as state-approved trauma centers and shall include all trauma centers verified as of October 1, 1990, and subsequently, subject to specific programmatic and quality of care standards.

9 (2)(a) The department shall annually notify each acute 10 care general hospital and each local and each regional trauma 11 agency in the state that the department is accepting letters of intent from hospitals that are interested in becoming 12 state-approved trauma centers. In order to be considered by 13 14 the department, a hospital that operates within the geographic 15 area of a local or regional trauma agency must certify that its intent to operate as a state-approved trauma center is 16 17 consistent with the trauma services plan of the local or regional trauma agency, as approved by the department, if the 18 19 such agency exists. Letters of intent must be postmarked no 20 later than midnight October 1. This paragraph does not apply to any hospital that is a provisional or verified trauma 21 22 center on January 1, 1992.

(b) By October 15, the department shall send to all 23 24 hospitals that submitted a letter of intent an application 25 package that will provide the hospitals with instructions for submitting information to the department for selection as a 26 state-approved trauma center. The standards for verification 27 28 of trauma centers and pediatric trauma referral centers 29 provided for in s. 395.401(2), as adopted by rule of the department, shall serve as the basis for these instructions. 30 31

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1	(c) In order to be considered by the department,
2	applications from those hospitals seeking selection as
3	state-approved trauma centers, including those current
4	verified trauma centers that seek to be state-approved trauma
5	centers , must be received by the department no later than the
6	close of business on April 1. The department shall conduct a
7	provisional review of each application for the purpose of
8	determining that the hospital's application is complete and
9	that the hospital has the critical elements required for a
10	state-approved trauma center. This critical review will be
11	based on trauma center verification standards and shall
12	include, but not be limited to, a review of whether the
13	hospital has:
14	1. Equipment and physical facilities necessary to
15	provide trauma services.
16	2. Personnel in sufficient numbers and with proper
17	qualifications to provide trauma services.
18	3. An effective quality assurance process.
19	4. Submitted written confirmation by the local or
20	regional trauma agency that the verification of the hospital
21	as a state-approved trauma center is consistent with the plan
22	of the local or regional trauma agency, as approved by the
23	department, if such agency exists. This subparagraph applies
24	to any hospital that is not a provisional or verified trauma
25	center on January 1, 1992.
26	(d)1. Notwithstanding other provisions in this
27	section, the department may grant up to an additional 18
28	months to a hospital applicant that is unable to meet all
29	requirements as provided in paragraph (c) at the time of
30	application if the number of applicants in the service area in
31	which the applicant is located is equal to or less than the
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1 service area allocation, as provided by rule of the 2 department. An applicant that is granted additional time under 3 pursuant to this paragraph shall submit a plan for departmental approval which includes timelines and activities 4 5 that the applicant proposes to complete in order to meet б application requirements. Any applicant that demonstrates an 7 ongoing effort to complete the activities within the timelines 8 outlined in the plan shall be included in the number of 9 state-approved trauma centers at such time that the department 10 has conducted a provisional review of the application and has 11 determined that the application is complete and that the hospital has the critical elements required for a 12 13 state-approved trauma center. Timeframes provided in subsections (1)-(8) shall be 14 2. stayed until the department determines that the application is 15 complete and that the hospital has the critical elements 16 17 required for a state-approved trauma center. (3) After April 30, any hospital that submitted an 18 19 application found acceptable by the department based on 20 provisional review, including all trauma centers verified as 21 of December 1, 1989, shall be eligible to operate as a 22 provisional state-approved trauma center. 23 Between May 1 and October 1 of each year, the (4) 24 department shall conduct an in-depth evaluation of all applications found acceptable in the provisional review. The 25 applications shall be evaluated against criteria enumerated in 26 27 the application packages as provided to the hospitals by the 28 department. (5) Beginning October 1 of each year and ending no 29 30 later than June 1 of the following year, a review team of 31 out-of-state experts assembled by the department shall make 21

1 onsite visits to all provisional state-approved trauma 2 centers. The department shall develop a survey instrument to 3 be used by the expert team of reviewers. The instrument shall include objective criteria and guidelines for reviewers based 4 5 on existing trauma center and pediatric trauma referral center 6 verification standards such that all trauma centers and 7 pediatric trauma referral centers are assessed equally. The survey instrument shall also include a uniform rating system 8 9 that will be used by reviewers to indicate the degree of 10 compliance of each center with specific standards, and to 11 indicate the quality of care provided by each center as determined through an audit of patient charts. In addition, 12 13 hospitals being considered as provisional state-approved trauma centers shall meet all the requirements of a verified 14 trauma center or pediatric trauma referral center, and shall 15 16 be located in a trauma service area that has a need for such a 17 center.

(6) Based on recommendations from the review team, the 18 19 department shall select state-approved trauma centers by July 20 1. An applicant for designation as a state-approved trauma center or a state-approved pediatric trauma referral center 21 may request an extension of its provisional status if it 22 submits a corrective action plan to the department. The 23 24 corrective action plan must demonstrate the ability of the 25 applicant to correct deficiencies noted during the applicant's onsite review conducted by the department between the previous 26 October 1 and June 1. The department may extend the 27 28 provisional status of an applicant for designation as a 29 state-approved trauma center or a state-approved pediatric trauma referral center through December 31 if the applicant 30 31 provides a corrective action plan acceptable to the

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1 department. The department or a team of out-of-state experts 2 assembled by the department shall conduct an onsite visit on 3 or before November 1 to confirm that the deficiencies have been corrected. The provisional state-approved trauma center 4 5 or the provisional state-approved pediatric trauma referral б center is responsible for all costs associated with the onsite visit in a manner prescribed by rule of the department. By 7 8 January 1, the department must approve or deny the application 9 of any provisional applicant granted an extension. Each 10 state-approved trauma center shall be granted a 7-year 11 verification period during which time it must continue to maintain trauma center verification standards and acceptable 12 13 patient outcomes as determined by department rule. A verification, unless sooner suspended or revoked, 14 automatically expires 7 years after the date of issuance and 15 is renewable upon application for renewal as prescribed by 16 17 rule of the department. After July 1, 1992, only those 18 hospitals selected as state-approved trauma centers may 19 operate as trauma centers.

20 (7) Any hospital that wishes to protest a decision 21 made by the department based on the department's preliminary or in-depth review of applications or on the recommendations 22 of the site visit review team pursuant to this section shall 23 24 proceed as provided in chapter 120. Hearings held under this 25 subsection shall be conducted in the same manner as provided in ss. 120.569 and 120.57. Cases filed under chapter 120 may 26 27 combine all disputes between parties.

28 (8) Notwithstanding any provision of chapter 381, a 29 hospital licensed under ss. 395.001-395.3025 that operates a 30 state-approved trauma center may not terminate or

31 substantially reduce the availability of trauma service

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1 without providing at least <u>a 7-month</u> 6 months'notice of its 2 intent to terminate <u>the</u> such service. <u>The</u> Such notice shall be 3 given to the Department of Health, to all affected local or 4 regional trauma agencies, and to all state-approved trauma 5 centers, hospitals, and emergency medical service providers in 6 the trauma service area.

7 (9) Except as otherwise provided in this subsection, 8 the department or its agent may collect trauma care and 9 registry data, as prescribed by rule of the department, from 10 trauma centers, pediatric trauma referral centers, hospitals, 11 emergency medical service providers, local or regional trauma agencies, or medical examiners for the purposes of evaluating 12 trauma system effectiveness, ensuring compliance with the 13 standards of verification, and monitoring patient outcomes. A 14 trauma center, pediatric trauma referral center, hospital, 15 emergency medical service provider, medical examiner, or local 16 17 trauma agency or regional trauma agency, or a panel or 18 committee assembled by such an agency under s. 395.50(1) may, 19 but is not required to, disclose to the department patient 20 care quality assurance proceedings, records, or reports. However, the department may require a local trauma agency or a 21 regional trauma agency, or a panel or committee assembled by 22 such an agency to disclose to the department patient care 23 24 quality assurance proceedings, records, or reports that the 25 department needs solely to conduct quality assurance activities under s. 395.4015, or to ensure compliance with the 26 27 quality assurance component of the trauma agency's plan 28 approved under s. 395.401. The patient care quality assurance 29 proceedings, records, or reports that the department may require for these purposes include, but are not limited to, 30 31 the structure, processes, and procedures of the agency's

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quality assurance activities, and any recommendation for improving or modifying the overall trauma system, if the identity of a trauma center, pediatric trauma referral center, hospital, emergency medical service provider, medical examiner, or an individual who provides trauma services is not disclosed.

7 (10) Out-of-state experts assembled by the department 8 to conduct onsite visits are agents of the department for the purposes of s. 395.3025. An out-of-state expert who acts as an 9 10 agent of the department under this subsection is not liable 11 for any civil damages as a result of actions taken by him or her, unless he or she is found to be operating outside the 12 13 scope of the authority and responsibility assigned by the 14 department.

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

(12) Patient care, transport, or treatment records or 22 reports, or patient care quality assurance proceedings, 23 24 records, or reports obtained or made under pursuant to this 25 section, s. 395.3025(4)(f), s. 395.401, s. 395.4015, s. 395.402, s. 395.403, s. 395.404, s. 395.4045, s. 395.405, s. 26 395.50, or s. 395.51 must be held confidential by the 27 28 department or its agent and are exempt from the provisions of 29 s. 119.07(1). Patient care quality assurance proceedings, 30 records, or reports obtained or made under pursuant to these 31

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1 sections are not subject to discovery or introduction into 2 evidence in any civil or administrative action. 3 (13) The department may adopt, by rule, the procedures 4 and process by which it will select state-approved trauma 5 centers. The Such procedures and process must be used in б annually selecting state-approved trauma centers and must be 7 consistent with subsections (1)-(8) except in those situations 8 in which it is in the best interest of, and mutually agreed to 9 by, all applicants within a service area and the department to 10 reduce the timeframes. 11 Section 7. Section 395.403, Florida Statutes, is amended to read: 12 13 395.403 Reimbursement of state-sponsored trauma 14 centers.--15 (1)The Legislature finds that trauma centers many hospitals which provide services to trauma victims are not 16 17 adequately compensated for trauma care and such treatment. The 18 Legislature also recognizes that the current verified trauma 19 centers are providing such services without adequate reimbursement. Therefore, it is the intent of the Legislature 20 to provide financial support to the current verified trauma 21 centers and to establish a system of state-sponsored trauma 22 centers as soon as feasibly possible. It is also the intent 23 24 of the Legislature that this system of state-sponsored trauma 25 centers be assisted financially based on the volume and acuity of uncompensated trauma care provided. 26 27 (2) Each trauma center shall receive, on July 1, 2004, 28 a one-time appropriation of \$1 million in recognition of the 29 capital investment made by the hospital to establish the 30 trauma service. Each new trauma center approved by the 31 department after July 1, 2004, shall also receive the \$1

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1 million appropriation. All provisional and state-approved 2 trauma centers shall be considered state-sponsored trauma 3 centers when state funds are specifically appropriated for 4 state-sponsored trauma centers in the General Appropriations 5 Act. 6 (3) To receive state funding, a state-sponsored trauma 7 center shall submit a claim electronically via the Trauma 8 Claims Processing System, designed, developed, implemented, 9 and operated by the department's Medicaid program, to the 10 department's Medicaid program upon discharge of a trauma 11 patient. When a hospital stay spans a state fiscal year, a separate hospital claim shall be submitted for the hospital 12 days incurred in each fiscal year. 13 (4)(a) State-sponsored trauma centers shall determine 14 each trauma patient's eligibility for state funding prior to 15 16 the submission of a claim. 17 (b) A trauma patient treated must meet the definition 18 of charity care, have been designated as having an ISS score 19 of 9 or greater, and have received services that are medically 20 necessary from a state-sponsored trauma center in order for 21 the state-sponsored trauma center to receive state funding for 22 that patient. 23 (c) Each state-sponsored trauma center shall retain 24 appropriate documentation showing a trauma patient's 25 eligibility for state funding. Documentation recognized by the 26 department as appropriate shall be limited to one of the 27 following: 28 1. W-2 withholding forms. 29 2. Payroll stubs. 30 3. Income tax returns. 31

2 compensation or workers' compensation. 3 5. Written verification of wages from employer. 4 6. Written verification from public welfare agencies 5 or any other governmental agency which can attest to the 6 patient's income status for the past 12 months. 7 7. A witnessed statement signed by the patient or 8 responsible party, as provided for in Pub. L. No. 79-725, a	
 4 6. Written verification from public welfare agencies 5 or any other governmental agency which can attest to the 6 patient's income status for the past 12 months. 7 7. A witnessed statement signed by the patient or 	
5 or any other governmental agency which can attest to the 6 patient's income status for the past 12 months. 7 7. A witnessed statement signed by the patient or	
<pre>6 patient's income status for the past 12 months. 7 7. A witnessed statement signed by the patient or</pre>	15
7 7. A witnessed statement signed by the patient or	
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8 responsible party, as provided for in Pub. L. No. 79-725, a	is
9 amended, known as the Hill-Burton Act, except that such	
10 statement need not be obtained within 48 hours of the	
11 patient's admission to the hospital as required by the	
12 Hill-Burton Act. The statement shall include acknowledgment	it
13 that, in accordance with s. 817.50, providing false	
14 information to defraud a hospital for the purposes of	
15 obtaining goods or services is a misdemeanor of the second	
16 degree.	
17 (d) The department shall conduct an audit or shall	
18 contract with an independent party to conduct an audit of a	ach
19 state-sponsored trauma center's claims to ensure that state	H
20 funding was only provided for eligible trauma patients and	
21 medically necessary services.	
22 (e) The department's Medicaid program office shall	
23 check each claim to confirm that the patient is not covered	1
24 under the Medicaid program and shall pay the claim out of	:he
25 Trauma Services Trust Fund. Trauma patients who are eligib)le
26 for the Medicaid program shall not be considered eligible :	For
27 the state-sponsored trauma center program except for Medica	id
28 noncovered services. If a claim is denied by the Trauma	
29 Claims Processing System as a result of Medicaid eligibili	-Y
30 for Medicaid covered services, the hospital shall submit a	
31 claim to the Medicaid fiscal agent for payment.	

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1 (5) State funding shall be at a per diem rate equal to 2 \$860 to provisional state-approved and state-approved trauma 3 centers. This rate shall be effective for the first 12 months of funding, after which time payment to provisional 4 5 state-approved and state-approved trauma centers shall be 6 based on a trauma cost-based reimbursement methodology 7 developed by the department. The department shall consult with 8 representatives from the hospital industry including the Florida Hospital Association, the Association of Voluntary 9 Hospitals of Florida, and the Florida League of Hospitals in 10 11 the development of the reimbursement methodology. 12 (6)(a) To ensure a fair distribution of funds appropriated for state-sponsored trauma centers and to ensure 13 that no state-sponsored trauma center gains an unfair 14 advantage due solely to its ability to bill more quickly than 15 16 another state-sponsored trauma center, the total amount of 17 state funds appropriated in the General Appropriations Act for this section shall be divided into 19 trauma fund accounts 18 19 with an account for each service area established in s. 395.402(3). The amount of funds distributed to a service area 20 21 shall be based on the following formula: 22 23 24 $SAAA = SATD \times TA$ 25 TTD 26 where: 27 SAAA - service area appropriation amount. 28 SATD - uncompensated service area trauma days with ISS 29 score of 9 or greater. 30 TTD - uncompensated total trauma days with ISS score of 31 9 or greater for all 19 service areas.

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1 TA = total dollars appropriated for state-sponsored 2 trauma centers. 3 (b) The database to be used for this calculation shall 4 be the detailed patient discharge data of the most recently 5 completed calendar year for which the board possesses data. Out-of-state days that are included in the database shall be 6 7 allocated to the service area where the treating hospital is 8 located. 9 (c) Fifty percent of the funds allocated to those 10 service areas which had one or more trauma centers as of 11 December 1, 1989, shall be distributed to those verified trauma centers proportionately based on volume and acuity of 12 uncompensated trauma care provided during the most recently 13 completed calendar year for which the board possesses data in 14 15 a lump-sum payment on the date funding becomes available. These trauma centers shall submit claims pursuant to 16 17 subsection (3) in order to justify this funding. Effective 9 months after funding becomes available, any trauma center 18 19 which fails to submit claims for reimbursement equal to or 20 greater than the amount the trauma center received under the 21 initial allocation shall return any unearned funds to the department for distribution pursuant to paragraph (e). Once 22 this 50-percent lump sum is depleted, a trauma center will be 23 24 reimbursed from the remaining 50 percent of the service area's 25 original allocation. 26 (d) The department shall pay trauma claims on a 27 monthly basis. In a given month when the outstanding claims will exceed the unexpended funds allocated to a service area, 28 29 the department shall pay all of the submitted claims for the

service area on a pro rata basis. 30

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1	(e) At the end of the fiscal year, the unexpended
2	funds for each service area shall be placed in one large state
3	trauma account from which all remaining claims are paid
4	without regard to service area on a pro rata basis until such
5	funds are depleted.
6	(f) For any state fiscal year, reimbursement for any
7	patient residing outside the trauma service area of the
8	state-sponsored trauma center where the patient is treated
9	shall be paid out of the funds allocated for the trauma
10	service area where the patient resides. Out-of-state days
11	shall be paid from the service area where the treating
12	hospital is located.
13	(3) (7) In order to receive payments under this
14	section, a hospital shall be a state-sponsored trauma center
15	and shall:
16	(a) Agree to conform to all departmental requirements
17	as provided by rule to assure high-quality trauma services.
18	(b) Agree to provide information concerning the
19	provision of trauma services to the department, in a form and
20	manner prescribed by rule of the department.
21	(c) Agree to accept all trauma patients, regardless of
22	ability to pay, on a functional space-available basis.
23	(4) (8) A state-sponsored trauma center <u>that</u> which
24	fails to comply with any of the conditions listed in
25	subsection (3) (7) or the applicable rules of the department
26	shall not receive payments under this section for the period
27	in which it was not in compliance.
28	Section 8. Section 395.4033, Florida Statutes, is
29	created to read:
30	395.4033 Payments to trauma centersIt is the intent
31	of the Legislature to provide financial support to certified
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1	trauma centers in order for the centers to meet minimum
2	standards of trauma readiness and to create incentives for new
3	trauma centers to become a part of the system of trauma
4	centers. In compliance with this intent, the Department of
5	Health shall make annual payments from the Trauma Services
6	Trust Fund to the trauma centers. The payments shall be in
7	equal amounts to all trauma centers in order for the centers
8	to meet minimum standards of trauma readiness. Each existing
9	trauma center and each center established after July 1, 2004,
10	may also receive a one-time payment in recognition of the
11	center's startup costs.
12	Section 9. Section 395.4036, Florida Statutes, is
13	created to read:
14	395.4036 Trauma preparedness payments
15	(1) Recognizing the Legislature's stated intent to
16	provide financial support to current verified trauma centers,
17	and to provide incentives to establish additional trauma
18	centers in the trauma center network, the department shall use
19	funds from the Trauma Services Trust Fund to assure the
20	availability and accessibility of trauma services throughout
21	this state. The department, in conjunction with the agency,
22	shall maximize resources for trauma services whenever
23	possible. Payment shall be equal to all trauma centers
24	operating on July 1, 2004, in order for those trauma centers
25	to meet the minimum standards for trauma preparedness. Each
26	operating and new trauma center shall receive a one-time
27	payment to recognize the trauma center's startup costs.
28	(2) The department shall allocate funds not disbursed
29	for trauma preparedness and startup costs to trauma centers to
30	pay for uncompensated trauma care. Distribution of funds to
31	each trauma center shall be in proportion to the amount of
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1 uncompensated care provided by a trauma center to the amount of uncompensated care provided in the state, as indicated in 2 3 the most recent year for which data is available. (3) Funds not disbursed for trauma preparedness, 4 5 startup costs, or uncompensated trauma care, shall be б deposited into the Nursing Student Forgiveness Trust Fund to 7 be used equally for the department's Nursing Student Loan 8 Forgiveness Program and the Nursing Scholarship Program. 9 Section 10. Subsection (1) of section 395.4045, 10 Florida Statutes, is amended to read: 11 395.4045 Emergency medical service providers; trauma transport protocols; transport of trauma alert victims to 12 trauma centers; interfacility transfer.--13 (1) Each emergency medical services provider licensed 14 under chapter 401 shall transport trauma alert victims to 15 hospitals approved as trauma centers, except as may be 16 17 provided for either in the department-approved trauma 18 transport protocol of the trauma agency for the geographical 19 area in which the emergency medical services licensee provides 20 services or, if no such department-approved trauma transport 21 protocol is in effect, as provided for in a department-approved provider's trauma transport protocol. 22 23 Section 11. The Medicaid Disproportionate Share Task 24 Force, created by section 150 of chapter 2003-397, Laws of 25 Florida, shall review the disbursement of Special Medicaid Payments made to trauma centers and assess the effectiveness 26 27 of the payments in assuring access to trauma care for all 28 persons in this state and protecting the financial viability 29 of the trauma centers. In conducting this assessment, the task 30 force shall consider the advice and suggestions of the

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1 Committee on Trauma, the Department of Health Trauma System Implementation Committee, and other interested parties. 2 3 Section 12. Subsection (7) is added to section 316.066, Florida Statutes, to read: 4 5 316.066 Written reports of crashes.-б (7) The department shall collect \$5 from each driver filing a written report of a crash as required by this 7 8 section. The fees collected under this subsection shall be 9 deposited in the Trauma Services Trust Fund. 10 Section 13. Subsection (13) is added to section 11 318.18, Florida Statutes, to read: 318.18 Amount of civil penalties.--The penalties 12 13 required for a noncriminal disposition pursuant to s. 318.14 are as follows: 14 (13) Notwithstanding any law to the contrary, the 15 clerk of the court shall collect an additional \$3 for each 16 civil violation of chapter 316; \$6 for each offense 17 specifically enumerated in s. 318.17; and \$9 for any other 18 19 offense in chapter 316 which is classified as a criminal 20 violation. The fees collected under this subsection shall be deposited in the Trauma Services Trust Fund. 21 Section 14. Subsection (3) is added to section 22 320.0801, Florida Statutes, to read: 23 320.0801 Additional license tax on certain vehicles.--24 25 (3) In addition to the license taxes imposed by s. 320.08 and in subsection (1), there is imposed an additional 26 27 surcharge of \$3 for the operation of a motor vehicle as defined in s. 320.01(1), a mobile home as defined in s. 28 29 320.01(2), and a moped as defined in s. 316.003(77), which tax shall be paid to the department or its agent upon the 30 31 registration or renewal of registration of the vehicle.

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Notwithstanding any law to the contrary, the revenues 1 collected from the tax imposed in this subsection shall be 2 3 deposited in the Trauma Services Trust Fund. Section 15. Subsection (11) is added to section 4 5 327.35, Florida Statutes, to read: б 327.35 Boating under the influence; penalties; 7 "designated drivers". ---8 (11) Notwithstanding any other provision of this 9 section, for any person convicted of a violation of subsection 10 (1), in addition to the fines set forth in subsections (2) and (4), an additional fine of \$50 shall be assessed and collected 11 in the same manner as the fines set forth in subsections (2) 12 and (4). All fines collected under this subsection shall be 13 14 deposited into the Trauma Services Trust Fund and used for the purposes set forth in s. 395.4035, after 5 percent is deducted 15 therefrom by the clerk of the court for administrative costs. 16 17 Section 16. Section 327.732, Florida Statutes, is created to read: 18 19 327.732 Trauma services. -- Notwithstanding any law to the contrary, the court shall impose an additional \$25 for 20 21 each noncriminal infraction of this chapter or chapter 328 and \$50 for each criminal infraction of this chapter or chapter 22 328. The fees collected under this section shall be deposited 23 24 in the Trauma Services Trust Fund. 25 Section 17. Driver's responsibility program.--26 (1) ANNUAL PENALTIES. -- In addition to any other 27 penalty authorized by law, the Department of Highway Safety 28 and Motor Vehicles shall impose an annual monetary penalty 29 against each person who: 30 (a) Accumulates six or more points under section

31 322.27(3), Florida Statutes, for violations of motor vehicle

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1 laws or ordinances, or applicable provisions of section 403.413(6)(b), Florida Statutes, during the preceding 36-month 2 3 period. The penalty assessed shall be \$100 for the first six 4 points the licensee accumulates and \$25 for each point 5 accumulated in excess of six points. The department shall б notify the licensee by first-class mail at the licensee's most 7 recent address on file with the department of the assessment 8 of the fifth point on the license. 9 (b) Is convicted of an offense relating to driving 10 under the influence under section 316.193, Florida Statutes, 11 during the preceding 36-month period. The penalty assessed shall be \$1,000 for the first conviction or \$1,500 for a 12 second or subsequent conviction, except that the penalty shall 13 be \$2,000 for the first or a subsequent conviction if the 14 licensee's blood-alcohol, urine-alcohol, or breath-alcohol 15 level is 0.20 or higher. 16 17 (c) Is convicted of a violation of section 324.021, Florida Statutes, during the preceding 36-month period. The 18 19 penalty assessed shall be \$250 for one or more convictions during the previous 36 months. 20 (d) Is convicted of a violation of section 322.03, 21 Florida Statutes, during the preceding 36-month period. The 22 penalty assessed shall be \$100 for one or more convictions 23 24 during the previous 36 months. (2) NOTICE OF PENALTY.--The department shall notify 25 the licensee of the assessment of a penalty by first-class 26 27 mail sent to the licensee's most recent address documented in 28 the department's records. The notice must specify the date by 29 which the penalty must be paid and describe the consequences if the licensee fails to timely pay the penalty. 30 31

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1	(3) INSTALLMENT PAYMENT OF PENALTYThe department
2	shall adopt by rule procedures to permit the licensee to pay
3	the penalty in installments. A licensee may not pay a penalty
4	total of less than \$2,300 over a period of more than 12
5	consecutive months or a penalty total of \$2,300 or more over a
6	period of more than 24 consecutive months. If the licensee is
7	paying by installment and fails to pay an installment payment,
8	the department may declare the full amount of the unpaid
9	penalty immediately due and payable.
10	(4) CREDIT CARD PAYMENT OF PENALTYThe department
11	may adopt by rule procedures to permit the licensee to pay the
12	penalty by credit card. The licensee must pay all costs
13	incurred by the department which are associated with the
14	acceptance of a credit card payment. If the penalty or related
15	credit card costs are returned as unpayable to the department
16	by the credit card issuer, the department shall immediately
17	suspend the licensee's driver's license. A license suspended
18	under this subsection remains suspended until the licensee
19	pays in full the penalty and all related costs incurred by the
20	department for accepting the credit card payment.
21	(5) FAILURE TO PAY PENALTYIf the licensee fails to
22	pay the penalty on or before 30 days after the date the
23	department sends the notice to the licensee, fails to enter
24	into an installment payment agreement with the department, or
25	fails to make an installment payment, the department shall
26	immediately suspend the licensee's driver's license. A license
27	suspended under this subsection remains suspended until the
28	licensee pays in full the penalty and all related costs
29	incurred by the department in collecting the penalty.
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1	(6) REMITTANCE OF PENALTY TO THE TRAUMA SERVICES TRUST
2	FUNDAll penalties collected by the department under this
3	section shall be deposited in the Trauma Services Trust Fund.
4	Section 18. This act shall take effect July 1, 2004.
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2	SENATE SUMMARY
3	Requires the Department of Health and the Agency for Health Care Administration to establish trauma care
4	one-time specified appropriation in recognition of the
5	capital investment made to establish the trauma service. Provides conditions for a certified trauma center to
6	from the Trauma Services Trust Fund to assure the
7	availability and accessibility of trauma services and for
8	startup costs. Requires the department to allocate funds not disbursed for trauma preparedness and startup costs
9	to trauma centers to pay for uncompensated trauma care. Allocates unspent funds to the department's Nursing
10	Student Loan Forgiveness Program and the Nursing Scholarship Program. Requires the Medicaid
11	Disproportionate Share Task Force to review the disbursement of Special Medicaid Payments made to trauma
12	centers to assess the effectiveness of the payments to the trauma care centers. Directs the Department of
13	Highway Safety and Motor Vehicles to collect a fee for each written report of a crash filed with the department.
14	Directs the clerk of court to collect a fee for each civil and criminal violation of ch. 316, F.S. Directs
15	that an additional surcharge be imposed on license registration for certain motor vehicles. Directs that an
16	additional surcharge be imposed on persons convicted of boating under the influence. Directs the court to collect
17	an additional fee for criminal and noncriminal violations of chapter 327 or chapter 328, F.S. Provides that all
18	fees collected be deposited in the Trauma Services Trust Fund. Creates the driver's responsibility program.
19	Directs the Department of Highway Safety and Motor Vehicles to annually impose specified monetary penalties
20	against motor vehicle licensees who have violated certain laws within the previous 36 months. Requires the
21	department to notify licensees of the penalty and the time period in which to pay the penalty. Requires the
22	department to accept installment payments for the penalties. Provides sanctions for a licensee's failure to
23	pay an installment. Allows the department the discretion to permit licensees to pay assessed penalties with credit
24	cards. Requires the department to suspend a driver's license if a credit card issuer returns the account as
25	unpayable. Requires the department to suspend a driver's license if the licensee does not pay the penalty or
26	arrange for an installment plan within a specified time after the notice of penalty is sent. Directs the
27	department to remit all penalties to the Trauma Service Trust Fund. Provides for distribution of funds to
28	certified trauma centers. (See bill for details.)
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