### Florida Senate - 2004

### CS for SB 2842

 $\mathbf{By}$  the Committee on Health, Aging, and Long-Term Care; and Senator Atwater

_	317-2420-04
1	A bill to be entitled
2	An act relating to trauma care center care
3	services; amending s. 381.74, F.S.; requiring
4	hospitals and trauma centers to provide data on
5	moderate-to-severe brain or spinal cord
б	injuries to the Department of Health; amending
7	s. 381.745, F.S.; defining "department" for
8	purposes of the "Charlie Mack Overstreet Brain
9	or Spinal Cord Injuries Act"; amending s.
10	395.40, F.S.; revising legislative findings;
11	revising duties of the Department of Health to
12	implement and plan for a statewide trauma
13	system; amending s. 395.4001, F.S.; revising
14	definitions; amending s. 395.401, F.S.;
15	revising components for local and regional
16	trauma services system plans; correcting
17	references to the term "trauma center";
18	amending s. 395.4015, F.S.; requiring that the
19	boundaries of the trauma regions administered
20	by the Department of Health be coterminous with
21	the boundaries of the regional domestic
22	security task forces established within the
23	Department of Law Enforcement; providing
24	exceptions for certain interlocal agreements
25	for trauma services in a regional system;
26	eliminating requirements for the Department of
27	Health to develop the minimum components for
28	systems plans in defined trauma regions;
29	amending s. 395.402, F.S.; revising
30	requirements for the Department of Health to
31	review trauma service areas; deleting an
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1	obsolete requirement that the department's
2	assignment of counties for the purposes of
3	developing a system of trauma centers remain as
4	established by ch. 90-284, Laws of Florida,
5	until completion of the department's initial
6	review; correcting references to the term
7	"trauma center"; amending s. 395.4025, F.S.;
8	revising requirements for the Department of
9	Health's development of a state trauma system
10	plan; deleting obsolete references; correcting
11	references to the term "trauma center";
12	revising requirements for the department's
13	approval and verification of a facility as a
14	trauma center; granting the department
15	authority to adopt rules for the procedures and
16	process for notification, duration, and
17	explanation of a trauma center's termination of
18	trauma services; revising the requirements for
19	notice that a hospital must give before it
20	terminates or substantially reduces trauma
21	service; exempting from certain time limits on
22	applications to operate as trauma centers
23	certain hospitals in areas having no trauma
24	center; amending s. 395.403, F.S.; correcting
25	references to the term "trauma center";
26	revising eligibility requirements for state
27	funding of trauma centers; providing that
28	trauma centers may request that their
29	distributions from the Administrative Trust
30	Fund be used as intergovernmental transfer
31	funds in the Medicaid program; amending s.

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1	395.404, F.S.; revising reporting requirements
2	to the trauma registry data system maintained
3	by the Department of Health; providing that
4	hospitals and trauma centers subject to
5	reporting trauma registry data to the
6	department are required to comply with other
7	duties concerning the moderate-to-severe brain
8	or spinal cord injury registry maintained by
9	the department; correcting references to the
10	term "trauma center"; amending s. 395.405,
11	F.S.; authorizing the Department of Health to
12	adopt and enforce rules necessary to administer
13	part II of ch. 395, F.S.; amending s. 318.18,
14	F.S.; directing the clerk of court to collect a
15	fee for each civil and criminal violation of
16	chapter 316, F.S.; creating s. 322.751, F.S.;
17	directing the Department of Highway Safety and
18	Motor Vehicles to assess specified annual
19	surcharges against a motor vehicle licensee who
20	accumulates seven or more points against his or
21	her license within the previous 36 months;
22	requiring the department to notify a licensee
23	by first-class mail upon receipt of four points
24	against his or her license; directing the
25	department to remit all such penalties to the
26	Administrative Trust Fund; creating s.
27	322.7515, F.S.; directing the department to
28	assess specified annual surcharges against
29	motor vehicle licensees who have a final
30	conviction within the previous 36 months for a
31	DUI offense; directing the department to remit
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1	all such penalties to the Administrative Trust
2	Fund; creating s. 322.7516, F.S.; directing the
3	department to assess specified annual
4	surcharges against a motor vehicle licensee who
5	has a conviction for driving without financial
6	responsibility, or for driving with a suspended
7	or revoked license, within the previous 36
8	months; directing the department to remit all
9	such penalties to the Administrative Trust
10	Fund; creating s. 322.7525, F.S.; requiring the
11	department to notify licensees of the
12	surcharges and the time period in which to pay
13	the surcharges; creating s. 322.753, F.S.;
14	requiring the department to accept installment
15	payments for the surcharges; providing
16	sanctions for a licensee's failure to pay an
17	installment; allowing the department to permit
18	licensees to pay assessed surcharges with
19	credit cards; requiring the department to
20	suspend a driver's license if the licensee does
21	not pay the surcharge or arrange for
22	installment payments within a specified time
23	after the notice of surcharge is sent;
24	repealing s. 395.4035, F.S., relating to the
25	Trauma Services Trust Fund; providing an
26	effective date.
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28	Be It Enacted by the Legislature of the State of Florida:
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30	Section 1. Subsection (1) of section 381.74, Florida
31	Statutes, is amended to read:
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1	381.74 Establishment and maintenance of a central
2	registryThe department shall establish and maintain a
3	central registry of persons who have moderate-to-severe brain
4	or spinal cord injuries.
5	(1) Every public health agency, private health agency,
6	public social agency, private social agency, <u>hospital, trauma</u>
7	center, and attending physician shall report to the department
8	division within 5 days after identification or diagnosis of
9	any person who has a moderate-to-severe brain or spinal cord
10	injury. The consent of such person shall not be required.
11	Section 2. Present subsections (2) through (10) of
12	section 381.745, Florida Statutes, are redesignated as
13	subsections (3) through (11), respectively, and a new
14	subsection (2) is added to that section, to read:
15	381.745 Definitions; ss. 381.739-381.79As used in
16	ss. 381.739-381.79, the term:
17	(2) "Department" means the Department of Health.
18	Section 3. Subsection (5) of section 395.40, Florida
19	Statutes, is amended to read:
20	395.40 Legislative findings and intent
21	(5) In addition, the agencies listed in subsection (4)
22	should undertake to:
23	(a) Establish a coordinated methodology for
24	monitoring, evaluating, and enforcing the requirements of the
25	state's inclusive trauma system which recognizes the interests
26	of each agency.
27	(b) Develop appropriate roles for trauma agencies, to
28	assist in furthering the operation of trauma systems at the
29	regional level. This should include issues of system
30	evaluation as well as managed care.
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1	(c) Develop and submit appropriate requests for
2	waivers of federal requirements which will facilitate the
3	delivery of trauma care.
4	(d) Develop criteria that will become the future basis
5	for mandatory consultation between acute care hospitals and
6	trauma centers on the care of trauma victims and the mandatory
7	transfer of appropriate trauma victims to trauma centers.
8	(e) Develop a coordinated approach to the care of the
9	trauma victim. This shall include the movement of the trauma
10	victim through the system of care and the identification of
11	medical responsibility for each phase of care for
12	out-of-hospital and in-hospital trauma care.
13	(f) Require the medical director of an emergency
14	medical services provider to have medical accountability for a
15	trauma victim during interfacility transfer.
16	Section 4. Section 395.4001, Florida Statutes, is
17	amended to read:
18	395.4001 DefinitionsAs used in this part, the term:
19	(1) "Agency" means the Agency for Health Care
20	Administration.
21	(2) "Charity care" or "uncompensated trauma charity
22	care" means that portion of hospital charges reported to the
23	agency for which there is no compensation, other than
24	restricted or unrestricted revenues provided to a hospital by
25	local governments or tax districts regardless of method of
26	payment, for care provided to a patient whose family income
27	for the 12 months preceding the determination is less than or
28	equal to $200$ $150$ percent of the federal poverty level, unless
29	the amount of hospital charges due from the patient exceeds 25
30	percent of the annual family income. However, in no case shall
31	the hospital charges for a patient whose family income exceeds
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1 four times the federal poverty level for a family of four be 2 considered charity. 3 "Department" means the Department of Health. (3) 4 (4) "Interfacility trauma transfer" means the transfer 5 of a trauma victim between two facilities licensed under this б chapter, pursuant to this part. 7 "Level I trauma center" means a trauma center (5) 8 that: 9 (a) Has formal research and education programs for the 10 enhancement of trauma care; and is verified determined by the 11 department to be in substantial compliance with Level I trauma center and pediatric trauma referral center standards; and has 12 13 been approved by the department to operate as a Level I trauma 14 center. Serves as a resource facility to Level II trauma 15 (b) centers, pediatric trauma referral centers, and general 16 17 hospitals through shared outreach, education, and quality 18 improvement activities. 19 (c) Participates in an inclusive system of trauma 20 care, including providing leadership, system evaluation, and quality improvement activities. 21 22 (6) "Level II trauma center" means a trauma center 23 that: 24 (a) Is verified determined by the department to be in 25 substantial compliance with Level II trauma center standards and has been approved by the department to operate as a Level 26 27 II trauma center. 28 (b) Serves as a resource facility to general hospitals 29 through shared outreach, education, and quality improvement 30 activities. 31

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1	(c) Participates in an inclusive system of trauma
2	care.
3	(7) "Pediatric trauma <del>referral</del> center" means a
4	hospital that is <u>verified</u> <del>determined</del> by the department to be
5	in substantial compliance with pediatric trauma referral
6	center standards as established by rule of the department and
7	has been approved by the department to operate as a pediatric
8	trauma center.
9	(8) "Provisional trauma center" means a hospital that
10	has been verified by the department to be in substantial
11	compliance with the requirements in s. 395.4025 and has been
12	approved by the department to operate as a provisional Level I
13	trauma center, Level II trauma center, or pediatric trauma
14	center.
15	(8) "State-approved trauma center" means a hospital
16	that has successfully completed the selection process pursuant
17	to s. 395.4025 and has been approved by the department to
18	<del>operate as a trauma center in the state.</del>
19	<del>(9) "State-sponsored trauma center" means a trauma</del>
20	<del>center or pediatric trauma referral center that receives state</del>
21	funding for trauma care services under s. 395.403.
22	<u>(9)<del>(10)</del> "Trauma agency" means a department-approved</u>
23	agency established and operated by one or more counties, or a
24	department-approved entity with which one or more counties
25	contract, for the purpose of administering an inclusive
26	regional trauma system.
27	<u>(10)<del>(11)</del> "Trauma alert victim" means a person who has</u>
28	incurred a single or multisystem injury due to blunt or
29	penetrating means or burns, who requires immediate medical
30	intervention or treatment, and who meets one or more of the
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adult or pediatric scorecard criteria established by the 1 2 department by rule. 3 (11)(12) "Trauma center" means a any hospital that has 4 been verified determined by the department to be in substantial compliance with the requirements in s. 395.4025 5 б and has been approved by the department to operate as a Level 7 I trauma center, Level II trauma center, or pediatric trauma center verification standards as either state-approved or 8 9 provisional state-approved. (12)<del>(13)</del> "Trauma scorecard" means a statewide 10 11 methodology adopted by the department by rule under which a person who has incurred a traumatic injury is graded as to the 12 13 severity of his or her injuries or illness and which 14 methodology is used as the basis for making destination decisions. 15 16 (13)(14) "Trauma transport protocol" means a document 17 which describes the policies, processes, and procedures governing the dispatch of vehicles, the triage, prehospital 18 19 transport, and interfacility trauma transfer of trauma 20 victims. (14)(15) "Trauma victim" means any person who has 21 22 incurred a single or multisystem injury due to blunt or 23 penetrating means or burns and who requires immediate medical 24 intervention or treatment. 25 Section 5. Section 395.401, Florida Statutes, is amended to read: 26 27 395.401 Trauma services system plans; verification of 28 trauma centers and pediatric trauma referral centers; 29 procedures; renewal.--(1)(a) The local and regional trauma agencies shall 30 31 plan, implement, and evaluate trauma services systems, in 9

1 accordance with this section and ss. 395.4015, 395.404, and 2 395.4045, which consist of organized patterns of readiness and 3 response services based on public and private agreements and 4 operational procedures. The department shall establish, by 5 rule, processes and procedures for establishing a trauma б agency and obtaining its approval from the department. 7 The local and regional trauma agencies shall (b) 8 develop and submit to the department plans for local and 9 regional trauma services systems. The plans must include, at a 10 minimum, the following components: 11 1. The organizational structure of the trauma system. Prehospital care management guidelines for triage 12 2. 13 and transportation of trauma cases. Flow patterns of trauma cases and transportation 14 3. 15 system design and resources, including air transportation services, provision for interfacility trauma transfer, and the 16 17 prehospital transportation of trauma victims. The trauma 18 agency shall plan for the development of a system of 19 transportation of trauma alert victims to trauma centers where the distance or time to a trauma center or transportation 20 21 resources diminish access by trauma alert victims. The number and location of needed state-approved 22 4. trauma centers based on local needs, population, and location 23 24 and distribution of resources. 25 5. Data collection regarding system operation and patient outcome. 26 27 Periodic performance evaluation of the trauma 6. 28 system and its components. 29 The use of air transport services within the 7. 30 jurisdiction of the local trauma agency. 31 10

1 8. Public information and education about the trauma 2 system. 3 9. Emergency medical services communication system usage and dispatching. 4 5 The coordination and integration between the 10. б verified trauma center care facility and other acute care 7 hospitals the nonverified health care facilities. 8 11. Medical control and accountability. 9 12. Quality control and system evaluation. 10 (C) The department shall receive plans for the 11 implementation of inclusive trauma systems from trauma The department may approve or not approve trauma 12 agencies. agency plans based on the conformance of the plan with this 13 section and ss. 395.4015, 395.404, and 395.4045 and the rules 14 and definitions adopted by the department pursuant to those 15 16 sections. The department shall approve or disapprove the 17 plans within 120 days after the date the plans are submitted 18 to the department. The department shall, by rule, provide an 19 application process for establishing a trauma agency. The 20 application must, at a minimum, provide requirements for the 21 trauma agency plan submitted for review, a process for 22 reviewing the application for a state-approved trauma agency, a process for reviewing the trauma transport protocols for the 23 24 trauma agency, and a process for reviewing the staffing 25 requirements for the agency. The department shall, by rule, establish minimum requirements for a trauma agency to conduct 26 27 an annual performance evaluation and submit the results to the 28 department. 29 (d) A trauma agency shall not operate unless the 30 department has approved the local or regional trauma services

31 system plan of the agency.

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1	(e) The department may grant an exception to a portion
2	of the rules adopted pursuant to this section or s. 395.4015
3	if the local or regional trauma agency proves that, as defined
4	in the rules, compliance with that requirement would not be in
5	the best interest of the persons served within the affected
б	local or regional trauma area.
7	(f) A local or regional trauma agency may implement a
8	trauma care system only if the system meets the minimum
9	standards set forth in the rules for implementation
10	established by the department and if the plan has been
11	submitted to, and approved by, the department. At least 60
12	days before the local or regional trauma agency submits the
13	plan for the trauma care system to the department, the local
14	or regional trauma agency shall hold a public hearing and give
15	adequate notice of the public hearing to all hospitals and
16	other interested parties in the area to be included in the
17	proposed system.
18	(g) Local or regional trauma agencies may enter into
19	contracts for the purpose of implementing the local or
20	regional plan. If local or regional agencies contract with
21	hospitals for trauma services, such agencies must contract
22	only with hospitals which are verified trauma centers.
23	(h) Local or regional trauma agencies providing
24	service for more than one county shall, as part of their
25	formation, establish interlocal agreements between or among
26	the several counties in the regional system.
27	(i) This section does not restrict the authority of a
28	health care facility to provide service for which it has
29	received a license pursuant to this chapter.
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1 (j) Any hospital which is verified as a trauma center 2 shall accept all trauma victims that are appropriate for the 3 facility regardless of race, sex, creed, or ability to pay. 4 (k) It is unlawful for any hospital or other facility 5 to hold itself out as a trauma center unless it has been so б verified. 7 (1) A county, upon the recommendations of the local or 8 regional trauma agency, may adopt ordinances governing the 9 transport of a patient who is receiving care in the field from 10 prehospital emergency medical personnel when the patient meets 11 specific criteria for trauma, burn, or pediatric centers adopted by the local or regional trauma agency. 12 These ordinances must be consistent with s. 395.4045, ordinances 13 adopted under s. 401.25(6), and the local or regional trauma 14 system plan and, to the furthest possible extent, must ensure 15 that individual patients receive appropriate medical care 16 17 while protecting the interests of the community at large by 18 making maximum use of available emergency medical care 19 resources. 20 The local or regional trauma agency shall, (m) 21 consistent with the regional trauma system plan, coordinate and otherwise facilitate arrangements necessary to develop a 22 23 trauma services system. 24 (n) After the submission of the initial trauma system 25 plan, each trauma agency shall, every 5th year, submit to the department for approval an updated plan that identifies the 26 changes, if any, to be made in the regional trauma system. 27 28 This section does not preclude a local or regional (o) 29 trauma agency from adopting trauma care system standards. (2) The department shall adopt, by rule, standards for 30 31 verification of trauma centers based on national guidelines, 13 **CODING:**Words stricken are deletions; words underlined are additions.

1	including those established by the American College of
2	Surgeons entitled "Hospital and Prehospital Resources for
3	Optimal Care of the Injured Patient" and published appendices
4	thereto. Standards specific to pediatric trauma <del>referral</del>
5	centers shall be developed in conjunction with Children's
6	Medical Services and adopted by rule of the department.
7	(3) The department may withdraw local or regional
8	agency authority, prescribe corrective actions, or use the
9	administrative remedies as provided in s. 395.1065 for the
10	violation of any provision of this section and ss. 395.4015,
11	395.402, 395.4025, 395.403, 395.404, and 395.4045 or rules
12	adopted thereunder. All amounts collected pursuant to this
13	subsection shall be deposited into the Emergency Medical
14	Services Trust Fund provided in s. 401.34.
15	Section 6. Section 395.4015, Florida Statutes, is
16	amended to read:
17	395.4015 State regional trauma planning; trauma
18	regions
19	(1) The department shall establish a state trauma
20	system plan. As part of the state trauma system plan, the
21	department shall establish trauma regions <u>that</u> which cover all
22	geographical areas of the state and have boundaries that are
23	coterminous with the boundaries of the regional domestic
24	security task forces established under s. 943.0312. These
25	regions may serve as the basis for the development of
26	department-approved local or regional trauma plans. <u>However,</u>
27	the delivery of trauma services by or in coordination with a
28	trauma agency established before July 1, 2004, may continue in
29	accordance with public and private agreements and operational
30	procedures entered into as provided in s. 395.401. The
31	department shall base its definition of the regions upon:
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1 (a) Geographical considerations so as to ensure rapid 2 access to trauma care by patients; 3 (b) Historical patterns of patient referral and transfer in an area; 4 5 (c) Inventories of available trauma care resources; 6 (d) Predicted population growth characteristics; 7 (e) Transportation capabilities, including ground and 8 air transport; 9 (f) Medically appropriate ground and air travel times; 10 and 11 (g) Other appropriate criteria. 12 (2) The department shall develop trauma systems plans 13 for the 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, as well as other 18 relevant characteristics of the region. 19 (b) The organizational structure of the regional 20 trauma system, including the identification of local trauma 21 agency service areas within the region. 22 (c) Prehospital care management guidelines for triage and transportation of trauma cases. 23 24 (d) Flow patterns of trauma cases and transportation 25 system design and resources, including air transportation 26 services, provision for interfacility trauma transfer, and the 27 prehospital transportation of trauma victims. The department 28 shall plan for the development of a system of transportation of trauma alert victims to trauma centers where the distance 29 30 or time to a trauma center or transportation resources 31 diminish access by trauma alert victims.

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1 its own plan, accept components developed by local or regional 2 trauma agencies. 3 (3) (4) The department shall use the state trauma 4 system plan as the basis for establishing a statewide 5 inclusive trauma system. б Section 7. Subsection (3) of section 395.402, Florida 7 Statutes, is amended to read: 8 395.402 Trauma service areas; number and location of 9 trauma centers.--10 (3) Trauma service areas are to be used. The 11 department shall periodically review the assignment of the 67 counties to trauma service areas. These assignments are made 12 for the purpose of developing a system of trauma centers. 13 14 Revisions made by the department should take into 15 consideration the recommendations made as part of the regional trauma system plans approved by the department, as well as the 16 17 recommendations made as part of the state trauma system plan. 18 These areas must, at a minimum, be reviewed in the year 2000 and every 5 years thereafter. Until the department completes 19 20 its initial review, the assignment of counties shall remain as established pursuant to chapter 90-284, Laws of Florida. 21 22 (a) The following trauma service areas are hereby established: 23 24 1. Trauma service area 1 shall consist of Escambia, Okaloosa, Santa Rosa, and Walton Counties. 25 Trauma service area 2 shall consist of Bay, Gulf, 26 2. Holmes, and Washington Counties. 27 Trauma service area 3 shall consist of Calhoun, 28 3. 29 Franklin, Gadsden, Jackson, Jefferson, Leon, Liberty, Madison, Taylor, and Wakulla Counties. 30 31 17

1 4. Trauma service area 4 shall consist of Alachua, Bradford, Columbia, Dixie, Gilchrist, Hamilton, Lafayette, 2 3 Levy, Putnam, Suwannee, and Union Counties. 4 5. Trauma service area 5 shall consist of Baker, Clay, 5 Duval, Nassau, and St. Johns Counties. б 6. Trauma service area 6 shall consist of Citrus, Hernando, and Marion Counties. 7 8 7. Trauma service area 7 shall consist of Flagler and 9 Volusia Counties. 10 8. Trauma service area 8 shall consist of Lake, 11 Orange, Osceola, Seminole, and Sumter Counties. Trauma service area 9 shall consist of Pasco and 12 9. 13 Pinellas Counties. 10. Trauma service area 10 shall consist of 14 15 Hillsborough County. 11. Trauma service area 11 shall consist of Hardee, 16 17 Highlands, and Polk Counties. Trauma service area 12 shall consist of Brevard 12. 18 19 and Indian River Counties. Trauma service area 13 shall consist of DeSoto, 20 13. 21 Manatee, and Sarasota Counties. 14. Trauma service area 14 shall consist of Martin, 22 Okeechobee, and St. Lucie Counties. 23 Trauma service area 15 shall consist of Charlotte, 24 15. 25 Glades, Hendry, and Lee Counties. Trauma service area 16 shall consist of Palm Beach 26 16. 27 County. 28 17. Trauma service area 17 shall consist of Collier 29 County. 30 Trauma service area 18 shall consist of Broward 18. 31 County. 18

1 19. Trauma service area 19 shall consist of Dade and 2 Monroe Counties. 3 (b) Each trauma service area should have at least one 4 Level I or Level II trauma center. The department shall 5 allocate, by rule, the number of trauma centers needed for б each trauma service area. 7 (c) There shall be no more than a total of 44 8 state-sponsored trauma centers in the state. Section 8. Section 395.4025, Florida Statutes, is 9 10 amended to read: 11 395.4025 State-approved Trauma centers; selection; quality assurance; records. --12 13 (1) For purposes of developing a system of 14 state-approved trauma centers, the department shall use the 19 trauma service areas established in s. 395.402. Within each 15 service area and based on the state trauma system plan, the 16 17 local or regional trauma services system plan, and recommendations of the local or regional trauma agency, and 18 19 the 1990 Report and Proposal for Funding State-Sponsored 20 Trauma Centers, the department shall establish the approximate number of state-approved trauma centers needed to ensure 21 22 reasonable access to high-quality trauma services. The Using the guidelines and procedures outlined in the 1990 report, 23 24 except when in conflict with those prescribed in this section, 25 the department shall select those hospitals that are to be 26 recognized as state-approved trauma centers and shall include 27 all trauma centers verified as of October 1, 1990, and 28 subsequently, subject to specific programmatic and quality of 29 care standards. 30 (2)(a) The department shall annually notify each acute 31 care general hospital and each local and each regional trauma 19

1 agency in the state that the department is accepting letters 2 of intent from hospitals that are interested in becoming 3 state-approved trauma centers. In order to be considered by 4 the department, a hospital that operates within the geographic 5 area of a local or regional trauma agency must certify that 6 its intent to operate as a state-approved trauma center is 7 consistent with the trauma services plan of the local or 8 regional trauma agency, as approved by the department, if such 9 agency exists. Letters of intent must be postmarked no later than midnight October 1. This paragraph does not apply to any 10 11 hospital that is a provisional or verified trauma center on 12 January 1, 1992.

13 (b) By October 15, the department shall send to all hospitals that submitted a letter of intent an application 14 package that will provide the hospitals with instructions for 15 submitting information to the department for selection as a 16 17 state-approved trauma center. The standards for verification of trauma centers and pediatric trauma referral centers 18 19 provided for in s. 395.401(2), as adopted by rule of the 20 department, shall serve as the basis for these instructions.

21 (c) In order to be considered by the department, applications from those hospitals seeking selection as 22 state-approved trauma centers, including those current 23 24 verified trauma centers that seek a change or redesignation in 25 approval status as a trauma center to be state-approved trauma centers, must be received by the department no later than the 26 close of business on April 1. The department shall conduct a 27 28 provisional review of each application for the purpose of 29 determining that the hospital's application is complete and 30 that the hospital has the critical elements required for a 31 state-approved trauma center. This critical review will be

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1 based on trauma center verification standards and shall include, but not be limited to, a review of whether the 2 3 hospital has: 4 1. Equipment and physical facilities necessary to 5 provide trauma services. б 2. Personnel in sufficient numbers and with proper 7 qualifications to provide trauma services. 8 3. An effective quality assurance process. 9 4. Submitted written confirmation by the local or 10 regional trauma agency that the verification of the hospital 11 applying to become as a state-approved trauma center is consistent with the plan of the local or regional trauma 12 13 agency, as approved by the department, if such agency exists. 14 This subparagraph applies to any hospital that is not a provisional or verified trauma center on January 1, 1992. 15 (d)1. Notwithstanding other provisions in this 16 17 section, the department may grant up to an additional 18 18 months to a hospital applicant that is unable to meet all 19 requirements as provided in paragraph (c) at the time of 20 application if the number of applicants in the service area in 21 which the applicant is located is equal to or less than the service area allocation, as provided by rule of the 22 department. An applicant that is granted additional time 23 24 pursuant to this paragraph shall submit a plan for 25 departmental approval which includes timelines and activities that the applicant proposes to complete in order to meet 26 27 application requirements. Any applicant that demonstrates an 28 ongoing effort to complete the activities within the timelines 29 outlined in the plan shall be included in the number of 30 state-approved trauma centers at such time that the department 31 has conducted a provisional review of the application and has 21

determined that the application is complete and that the
 hospital has the critical elements required for a
 state-approved trauma center.

2. Timeframes provided in subsections (1)-(8) shall be
stayed until the department determines that the application is
complete and that the hospital has the critical elements
required for a state-approved trauma center.

8 (3) After April 30, any hospital that submitted an 9 application found acceptable by the department based on 10 provisional review, including all trauma centers verified as 11 of December 1, 1989, shall be eligible to operate as a 12 provisional state-approved trauma center.

13 (4) Between May 1 and October 1 of each year, the 14 department shall conduct an in-depth evaluation of all 15 applications found acceptable in the provisional review. The 16 applications shall be evaluated against criteria enumerated in 17 the application packages as provided to the hospitals by the 18 department.

19 (5) Beginning October 1 of each year and ending no 20 later than June 1 of the following year, a review team of 21 out-of-state experts assembled by the department shall make onsite visits to all provisional state-approved trauma 22 centers. The department shall develop a survey instrument to 23 24 be used by the expert team of reviewers. The instrument shall include objective criteria and guidelines for reviewers based 25 on existing trauma center and pediatric trauma referral center 26 27 verification standards such that all trauma centers and 28 pediatric trauma referral centers are assessed equally. The 29 survey instrument shall also include a uniform rating system 30 that will be used by reviewers to indicate the degree of 31 compliance of each trauma center with specific standards, and

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to indicate the quality of care provided by each <u>trauma</u> center as determined through an audit of patient charts. In addition, hospitals being considered as provisional <u>state-approved</u> trauma centers shall meet all the requirements of a <del>verified</del> trauma center <del>or pediatric trauma referral center</del>, and shall be located in a trauma service area that has a need for such a trauma center.

8 (6) Based on recommendations from the review team, the 9 department shall select state-approved trauma centers by July 10 1. An applicant for designation as a state-approved trauma 11 center or a state-approved pediatric trauma referral center may request an extension of its provisional status if it 12 13 submits a corrective action plan to the department. The corrective action plan must demonstrate the ability of the 14 applicant to correct deficiencies noted during the applicant's 15 onsite review conducted by the department between the previous 16 17 October 1 and June 1. The department may extend the provisional status of an applicant for designation as a 18 19 state-approved trauma center or a state-approved pediatric 20 trauma referral center through December 31 if the applicant provides a corrective action plan acceptable to the 21 department. The department or a team of out-of-state experts 22 assembled by the department shall conduct an onsite visit on 23 24 or before November 1 to confirm that the deficiencies have 25 been corrected. The provisional state-approved trauma center or the provisional state-approved pediatric trauma referral 26 27 center is responsible for all costs associated with the onsite 28 visit in a manner prescribed by rule of the department. By 29 January 1, the department must approve or deny the application of any provisional applicant granted an extension. Each 30 31 state-approved trauma center shall be granted a 7-year

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1 approval verification period during which time it must 2 continue to maintain trauma center verification standards and 3 acceptable patient outcomes as determined by department rule. 4 An approval A verification, unless sooner suspended or 5 revoked, automatically expires 7 years after the date of б issuance and is renewable upon application for renewal as 7 prescribed by rule of the department. After July 1, 1992, only 8 those hospitals selected as state-approved trauma centers may 9 operate as trauma centers.

10 (7) Any hospital that wishes to protest a decision 11 made by the department based on the department's preliminary or in-depth review of applications or on the recommendations 12 of the site visit review team pursuant to this section shall 13 proceed as provided in chapter 120. Hearings held under this 14 subsection shall be conducted in the same manner as provided 15 in ss. 120.569 and 120.57. Cases filed under chapter 120 may 16 17 combine all disputes between parties.

(8) Notwithstanding any provision of chapter 381, a 18 19 hospital licensed under ss. 395.001-395.3025 that operates a 20 state-approved trauma center may not terminate or 21 substantially reduce the availability of trauma service 22 without providing at least 180 days'6 months'notice of its intent to terminate such service. Such notice shall be given 23 24 to the department of Health, to all affected local or regional 25 trauma agencies, and to all state-approved trauma centers, hospitals, and emergency medical service providers in the 26 trauma service area. The department shall adopt by rule the 27 28 procedures and process for notification, duration, and 29 explanation of the termination of trauma services. 30 Except as otherwise provided in this subsection, (9)

31 the department or its agent may collect trauma care and

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1 registry data, as prescribed by rule of the department, from 2 trauma centers, pediatric trauma referral centers, hospitals, 3 emergency medical service providers, local or regional trauma 4 agencies, or medical examiners for the purposes of evaluating 5 trauma system effectiveness, ensuring compliance with the 6 standards of verification, and monitoring patient outcomes. A 7 trauma center, pediatric trauma referral center, hospital, 8 emergency medical service provider, medical examiner, or local 9 trauma agency or regional trauma agency, or a panel or 10 committee assembled by such an agency under s. 395.50(1) may, 11 but is not required to, disclose to the department patient care quality assurance proceedings, records, or reports. 12 13 However, the department may require a local trauma agency or a 14 regional trauma agency, or a panel or committee assembled by such an agency to disclose to the department patient care 15 quality assurance proceedings, records, or reports that the 16 17 department needs solely to conduct quality assurance activities under s. 395.4015, or to ensure compliance with the 18 19 quality assurance component of the trauma agency's plan 20 approved under s. 395.401. The patient care quality assurance 21 proceedings, records, or reports that the department may require for these purposes include, but are not limited to, 22 the structure, processes, and procedures of the agency's 23 24 quality assurance activities, and any recommendation for 25 improving or modifying the overall trauma system, if the identity of a trauma center, pediatric trauma referral center, 26 hospital, emergency medical service provider, medical 27 28 examiner, or an individual who provides trauma services is not 29 disclosed. 30 (10) Out-of-state experts assembled by the department 31 to conduct onsite visits are agents of the department for the

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1 purposes of s. 395.3025. An out-of-state expert who acts as an 2 agent of the department under this subsection is not liable 3 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 4 5 scope of the authority and responsibility assigned by the б department. 7 (11) Onsite visits by the department or its agent may 8 be conducted at any reasonable time and may include but not be 9 limited to a review of records in the possession of trauma 10 centers, pediatric trauma referral centers, hospitals, 11 emergency medical service providers, local or regional trauma agencies, or medical examiners regarding the care, transport, 12 13 treatment, or examination of trauma patients. 14 (12) Patient care, transport, or treatment records or 15 reports, or patient care quality assurance proceedings, records, or reports obtained or made pursuant to this section, 16 17 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. 395.50, or s. 18 19 395.51 must be held confidential by the department or its 20 agent and are exempt from the provisions of s. 119.07(1). Patient care quality assurance proceedings, records, or 21 reports obtained or made pursuant to these sections are not 22 subject to discovery or introduction into evidence in any 23 24 civil or administrative action. 25 (13) The department may adopt, by rule, the procedures and process by which it will select state-approved trauma 26 centers. Such procedures and process must be used in annually 27 28 selecting state-approved trauma centers and must be consistent 29 with subsections (1)-(8) except in those situations in which it is in the best interest of, and mutually agreed to by, all 30 31

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1 applicants within a service area and the department to reduce 2 the timeframes. 3 (14) Notwithstanding any other provision of this section and rules adopted pursuant to this section that impose 4 5 time limits on the applications by hospitals seeking approval б and verification to operate as a trauma center, any acute care 7 general or pediatric hospital that is located in a trauma 8 service area where there is no existing trauma center and that 9 has not already been previously approved may apply beginning 10 on July 1, 2004, to the Department of Health for approval and 11 verification to operate as a provisional trauma center or trauma center within the framework and substantive 12 13 requirements under this part. Section 9. Section 395.403, Florida Statutes, is 14 amended to read: 15 16 395.403 Reimbursement of state-sponsored trauma 17 centers.--18 (1) The Legislature finds that many hospitals which 19 provide services to trauma victims are not adequately 20 compensated for such treatment. The Legislature also 21 recognizes that the current verified trauma centers are providing such services without adequate reimbursement. 22 Therefore, it is the intent of the Legislature to provide 23 24 financial support to the current verified trauma centers and 25 to establish a system of state-sponsored trauma centers as soon as feasibly possible. It is also the intent of the 26 27 Legislature that this system of state-sponsored trauma centers 28 be assisted financially based on the volume and acuity of 29 uncompensated trauma care provided. 30 (2) All provisional trauma centers and state-approved 31 trauma centers shall be considered eligible to receive state 27

1	funding state-sponsored trauma centers when state revenues
2	dedicated for trauma centers funds are specifically
3	appropriated for <del>state-sponsored</del> trauma centers in the General
4	Appropriations Act. The department shall make annual payments
5	from the Administrative Trust Fund under s. 20.435 to the
6	trauma centers and provisional trauma centers in recognition
7	of the trauma centers' meeting the standards of trauma
8	readiness and preparedness as prescribed in this part. The
9	payments established in the General Appropriations Act shall
10	be in equal amounts for the provisional trauma centers and
11	trauma centers approved by the department as of July 1 of the
12	fiscal year in which funding is appropriated. If a provisional
13	trauma center or trauma center does not maintain its status as
14	a trauma center for any state fiscal year in which such
15	funding is appropriated, the provisional trauma center or
16	trauma center shall repay the state for the portion of the
17	year during which it was not a trauma center.
18	(3) The department shall allocate funds not disbursed
19	for trauma readiness and preparedness to provisional trauma
20	centers and trauma centers based on volume, acuity, and levels
21	of uncompensated trauma care. Distribution to a provisional
22	trauma center or trauma center shall be in an amount that
23	bears the same ratio to the total amount of such distributions
24	as the volume, acuity, and uncompensated trauma care provided
25	by the center bears to the total volume, acuity, and
26	uncompensated trauma care provided by all trauma centers and
27	provisional trauma centers in the state, as indicated in the
28	most recent year for which data is available.
29	(4) Provisional trauma centers and trauma centers
30	eligible to receive distributions from the Administrative
31	Trust Fund under s. 20.435 in accordance with subsections $(2)$
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1 and (3) may request that such funds be used as 2 intergovernmental transfer funds in the Medicaid program. 3 (3) To receive state funding, a state-sponsored trauma center shall submit a claim electronically via the Trauma 4 5 Claims Processing System, designed, developed, implemented, 6 and operated by the department's Medicaid program, to the 7 department's Medicaid program upon discharge of a trauma 8 patient. When a hospital stay spans a state fiscal year, a separate hospital claim shall be submitted for the hospital 9 10 days incurred in each fiscal year. 11 (4)(a) State-sponsored trauma centers shall determine each trauma patient's eligibility for state funding prior to 12 the submission of a claim. 13 (b) A trauma patient treated must meet the definition 14 of charity care, have been designated as having an ISS score 15 of 9 or greater, and have received services that are medically 16 17 necessary from a state-sponsored trauma center in order for 18 the state-sponsored trauma center to receive state funding for 19 that patient. 20 (c) Each state-sponsored trauma center shall retain 21 appropriate documentation showing a trauma patient's eligibility for state funding. Documentation recognized by the 22 department as appropriate shall be limited to one of the 23 24 following: 25 1. W-2 withholding forms. 26 2. Payroll stubs. 27 3. Income tax returns. 28 4. Forms approving or denying unemployment 29 compensation or workers' compensation. 30 5. Written verification of wages from employer. 31

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1	6. Written verification from public welfare agencies
2	<del>or any other governmental agency which can attest to the</del>
3	patient's income status for the past 12 months.
4	7. A witnessed statement signed by the patient or
5	responsible party, as provided for in Pub. L. No. 79-725, as
6	amended, known as the Hill-Burton Act, except that such
7	statement need not be obtained within 48 hours of the
8	patient's admission to the hospital as required by the
9	Hill-Burton Act. The statement shall include acknowledgment
10	that, in accordance with s. 817.50, providing false
11	information to defraud a hospital for the purposes of
12	obtaining goods or services is a misdemeanor of the second
13	<del>degree.</del>
14	(d) The department shall conduct an audit or shall
15	contract with an independent party to conduct an audit of each
16	state-sponsored trauma center's claims to ensure that state
17	funding was only provided for eligible trauma patients and
18	medically necessary services.
19	(e) The department's Medicaid program office shall
20	<del>check each claim to confirm that the patient is not covered</del>
21	under the Medicaid program and shall pay the claim out of the
22	Trauma Services Trust Fund. Trauma patients who are eligible
23	for the Medicaid program shall not be considered eligible for
24	the state-sponsored trauma center program except for Medicaid
25	noncovered services. If a claim is denied by the Trauma
26	Claims Processing System as a result of Medicaid eligibility
27	for Medicaid covered services, the hospital shall submit a
28	claim to the Medicaid fiscal agent for payment.
29	(5) State funding shall be at a per diem rate equal to
30	\$860 to provisional state-approved and state-approved trauma
31	<del>centers. This rate shall be effective for the first 12 months</del>
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1 of funding, after which time payment to provisional 2 state-approved and state-approved trauma centers shall be 3 based on a trauma cost-based reimbursement methodology developed by the department. The department shall consult with 4 5 representatives from the hospital industry including the 6 Florida Hospital Association, the Association of Voluntary 7 Hospitals of Florida, and the Florida League of Hospitals in 8 the development of the reimbursement methodology. 9 (6)(a) To ensure a fair distribution of funds 10 appropriated for state-sponsored trauma centers and to ensure 11 that no state-sponsored trauma center gains an unfair advantage due solely to its ability to bill more quickly than 12 13 another state-sponsored trauma center, the total amount of state funds appropriated in the General Appropriations Act for 14 this section shall be divided into 19 trauma fund accounts 15 with an account for each service area established in s. 16 17 395.402(3). The amount of funds distributed to a service area shall be based on the following formula: 18 19 20 21 <del>SAAA – SATD</del> <del>x TA</del> 22 TTD 23 where: 24 SAAA = service area appropriation amount. 25 SATD = uncompensated service area trauma days with ISS 26 score of 9 or greater. 27 TTD - uncompensated total trauma days with ISS score of 28 9 or greater for all 19 service areas. 29 TA - total dollars appropriated for state-sponsored 30 trauma centers. 31

1 (b) The database to be used for this calculation shall be the detailed patient discharge data of the most recently 2 3 completed calendar year for which the board possesses data. Out-of-state days that are included in the database shall be 4 5 allocated to the service area where the treating hospital is 6 located. 7 (c) Fifty percent of the funds allocated to those 8 service areas which had one or more trauma centers as of December 1, 1989, shall be distributed to those verified 9 10 trauma centers proportionately based on volume and acuity of 11 uncompensated trauma care provided during the most recently completed calendar year for which the board possesses data in 12 a lump-sum payment on the date funding becomes available. 13 These trauma centers shall submit claims pursuant to 14 subsection (3) in order to justify this funding. Effective 9 15 months after funding becomes available, any trauma center 16 which fails to submit claims for reimbursement equal to or 17 greater than the amount the trauma center received under the 18 19 initial allocation shall return any unearned funds to the 20 department for distribution pursuant to paragraph (e). Once 21 this 50-percent lump sum is depleted, a trauma center will be 22 reimbursed from the remaining 50 percent of the service area's 23 original allocation. 24 (d) The department shall pay trauma claims on a 25 monthly basis. In a given month when the outstanding claims 26 will exceed the unexpended funds allocated to a service area, 27 the department shall pay all of the submitted claims for the 28 service area on a pro rata basis. 29 (e) At the end of the fiscal year, the unexpended 30 funds for each service area shall be placed in one large state 31 trauma account from which all remaining claims are paid 32

1 without regard to service area on a pro rata basis until such 2 funds are depleted. 3 (f) For any state fiscal year, reimbursement for any 4 patient residing outside the trauma service area of the 5 state-sponsored trauma center where the patient is treated б shall be paid out of the funds allocated for the trauma service area where the patient resides. Out-of-state days 7 8 shall be paid from the service area where the treating 9 hospital is located. 10 (5)(7) In order to receive state funding payments 11 under this section, a hospital shall be a state-sponsored trauma center and shall: 12 (a) Agree to conform to all departmental requirements 13 as provided by rule to assure high-quality trauma services. 14 (b) Agree to provide information concerning the 15 provision of trauma services to the department, in a form and 16 17 manner prescribed by rule of the department. 18 (c) Agree to accept all trauma patients, regardless of 19 ability to pay, on a functional space-available basis. 20 (6)(8) A state-sponsored trauma center that which 21 fails to comply with any of the conditions listed in subsection(3)(7) or the applicable rules of the department 22 shall not receive payments under this section for the period 23 24 in which it was not in compliance. Section 10. Section 395.404, Florida Statutes, is 25 26 amended to read: 395.404 Review of trauma registry data; report to 27 28 central registry; confidentiality and limited release .--29 (1)(a) Each trauma center shall furnish, and, upon 30 request of the department, all acute care hospitals shall 31 furnish for department review, trauma registry data as 33

1 prescribed by rule of the department for the purpose of 2 monitoring patient outcome and ensuring compliance with the 3 standards of approval. 4 (b) Trauma registry data obtained pursuant to this 5 subsection are confidential and exempt from the provisions of s. 119.07(1) and s. 24(a), Art. I of the State Constitution. б 7 However, the department may provide such trauma registry data 8 to the person, trauma center, hospital, emergency medical service provider, local or regional trauma agency, medical 9 10 examiner, or other entity from which the data were obtained. 11 The department may also use or provide trauma registry data for purposes of research in accordance with the provisions of 12 13 chapter 405. (2) Each trauma center and acute care hospital shall 14 15 report to the department's brain and spinal cord injury central registry, consistent with the procedures and 16 17 timeframes of s. 381.74, any person who has a moderate-to-severe brain or spinal cord injury, and shall 18 19 include in the report the name, age, residence, and type of disability of the individual and any additional information 20 that the department finds necessary. Notwithstanding the 21 provisions of s. 381.74, each trauma center and acute care 22 hospital shall submit severe disability and head-injury 23 24 registry data to the department as provided by rule. Each 25 trauma center and acute care hospital shall continue to provide initial notification of persons who have severe 26 27 disabilities and head injuries to the Department of Health 28 within timeframes provided in chapter 413. Such initial 29 notification shall be made in the manner prescribed by the 30 Department of Health for the purpose of providing timely 31

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1 vocational rehabilitation services to the severely disabled or 2 head-injured person. 3 (3) Trauma registry data obtained pursuant to this section are confidential and exempt from the provisions of s. 4 5 119.07(1) and s. 24(a), Art. I of the State Constitution. б However, the department may provide such trauma registry data 7 to the person, trauma center, pediatric trauma referral center, hospital, emergency medical service provider, local or 8 9 regional trauma agency, medical examiner, or other entity from 10 which the data were obtained. The department may also use or 11 provide trauma registry data for purposes of research in accordance with the provisions of chapter 405. 12 Section 11. Section 395.405, Florida Statutes, is 13 amended to read: 14 395.405 Rulemaking.--The department shall adopt and 15 enforce all rules necessary to administer this part ss. 16 17 395.0199, 395.401, 395.4015, 395.402, 395.4025, 395.403, 395.404, and 395.4045. 18 Section 12. Subsection (13) is added to section 19 318.18, Florida Statutes, to read: 20 21 318.18 Amount of civil penalties.--The penalties required for a noncriminal disposition pursuant to s. 318.14 22 are as follows: 23 (13) Notwithstanding any law to the contrary, the 24 25 clerk of the court shall collect an additional \$6 for each civil violation of chapter 316; \$6 for each offense 26 27 specifically enumerated in s. 318.17; and \$9 for any other 28 offense in chapter 316 which is classified as a criminal 29 violation. The fees collected under this subsection shall be 30 deposited in the Administrative Trust Fund under s. 20.435. 31

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1	Section 13. Section 322.751, Florida Statutes, is
2	created to read:
3	322.751 Annual surcharge for points
4	(1) Each year the department shall assess a surcharge
5	on each person who has accumulated seven or more points
6	against his or her driver's license during the preceding
7	36-month period.
8	(2) The amount of a surcharge under this section is
9	\$100 for the first seven points and \$25 for each additional
10	point.
11	(3) The department shall notify the holder of a
12	driver's license of the assignment of a fourth point on that
13	license by first-class mail sent to the person's most recent
14	address as shown on the records of the department.
15	(4) This section does not apply to a conviction that
16	becomes final before July 1, 2004.
17	(5) All penalties collected by the department under
18	this section shall be deposited in the Administrative Trust
19	Fund under s. 20.435.
20	Section 14. Section 322.7515, Florida Statutes, is
21	created to read:
22	322.7515 Surcharge for conviction of driving under the
23	influence
24	(1) Each year the department shall assess a surcharge
25	on each person who has a final conviction during the preceding
26	36-month period for an offense relating to s. 316.193.
27	(2) The amount of a surcharge under this section is
28	\$1,000 per year, except that the amount of the surcharge is:
29	(a) One thousand five hundred dollars per year for a
30	second or subsequent conviction within a 36-month period; and
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1	(b) Two thousand dollars for a first or subsequent
2	conviction if the blood-alcohol level of the person was 0.20
3	or higher at the time the analysis was performed.
4	(3) A surcharge under this section for the same
5	conviction may not be assessed in more than 3 years.
6	(4) This section does not apply to a conviction that
7	becomes final before July 1, 2004.
8	(5) All penalties collected by the department under
9	this section shall be deposited in the Administrative Trust
10	Fund under s. 20.435.
11	Section 15. Section 322.7516, Florida Statutes, is
12	created to read:
13	322.7516 Surcharges for conviction for driving without
14	financial responsibility and for driving with a suspended or
15	revoked license
16	(1) In addition to any other penalty authorized by
17	law, the Department of Highway Safety and Motor Vehicles shall
18	impose an annual monetary penalty against each person who:
19	(a) Is convicted of a violation of s. 324.021 during
20	the preceding 36-month period. The penalty assessed under this
21	paragraph shall be in the amount of \$250 for one or more
22	convictions during the previous 36 months.
23	(b) Is convicted of a violation of s. 322.03 during
24	the preceding 36-month period. The penalty assessed under this
25	paragraph shall be in the amount of \$100 for one or more
26	convictions during the previous 36 months.
27	(2) All penalties collected by the department under
28	this section shall be deposited in the Administrative Trust
29	Fund under s. 20.435.
30	Section 16. Section 322.7525, Florida Statutes, is
31	created to read:
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1 322.7525 Notice of surcharge .--(1) The department shall notify the holder of a 2 3 driver's license of the assessment of a surcharge on that license by first-class mail sent to the person's most recent 4 5 address as shown on the records of the department. The notice б must specify the date by which the surcharge must be paid and 7 and state the consequences of a failure to pay the surcharge. 8 (2) If, before the 30th day after the date the 9 department sends a notice under s. 322.751, s. 322.7515, s. 10 322.7516, or s. 327.732, the person fails to pay the amount of 11 a surcharge on the person's license or fails to enter into an installment payment agreement with the department, the license 12 of the person is automatically suspended. 13 14 (3) A license suspended under this section remains suspended until the person pays the amount of the surcharge 15 16 and any related costs. 17 Section 17. Section 322.753, Florida Statutes, is 18 created to read: 19 322.753 Installment payment of surcharges .--The department shall by rule provide for the 20 (1) 21 payment of a surcharge in installments. (2) A rule under this section: 22 (a) May not permit a person to pay a surcharge: 23 24 1. Of less than \$2,300 over a period of more than 12 25 consecutive months; or 26 2. Of \$2,300 or more over a period of more than 24 27 consecutive months. (b) May provide that if the person fails to make a 28 29 required installment payment, the department may declare the 30 amount of the unpaid surcharge immediately due and payable. 31

1	(3) The department may by rule authorize the payment
2	of a surcharge by use of a credit card. The rules shall
3	require the person to pay all costs incurred by the department
4	in connection with the acceptance of the credit card.
5	(4) If a person pays a surcharge or related cost by
6	credit card and the amount is subsequently reversed by the
7	issuer of the credit card, the license of that person is
8	automatically suspended.
9	(5) A license suspended under this section remains
10	suspended until the person pays the amount of the surcharge
11	and any related costs.
12	Section 18. Section 395.4035, Florida Statutes, is
13	repealed.
14	Section 19. This act shall take effect July 1, 2004.
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1	STATEMENT OF SUBSTANTIAL CHANGES CONTAINED IN COMMITTEE SUBSTITUTE FOR
2	Senate Bill 2842
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4	The committee substitute revises several provisions relating
5 trauma centers are required to report specified in persons who have moderate-to-severe brain or spir 6 injuries to the brain and spinal cord central rec	to trauma care and the funding of trauma care. Hospitals and trauma centers are required to report specified information on
	injuries to the brain and spinal cord central registry in the
7	Department of Health (DOH). Legislative findings conferring duties on DOH relating to trauma care are revised.
8	The definition of "charity care" or "uncompensated care" is
9	revised to conform to the definition of "charity care" that is in chapter 409, F.S., which relates to the Medicaid program.
10	Definitions for trauma centers are revised to conform to DOH's approval process for verifying that the trauma centers have
11	met specified standards.
12	Time limits imposed on the application of any hospital seeking approval and verification to operate as a trauma center are
13	walved to allow any acute care general or pediatric hospital that is located in a trauma service area where there is no
14	existing trauma center and has not already been previously approved to apply beginning on July 1, 2004, to DOH for
15	approval and verification to operate as a provisional trauma center or trauma center within the framework and substantive
16	requirements of part II, chapter 395, F.S., which relates to trauma care.
17	The bill requires the boundaries of trauma regions
18	administered by DOH to be coterminous with the boundaries of the regional domestic security task forces established within
19	the Florida Department of Law Enforcement.
20	The bill directs the clerk of court to collect a fee for each civil and criminal violation of chapter 316, F.S., which
21 and Motor Vehicles is directed to collect	relates to traffic control. The Department of Highway Safety and Motor Vehicles is directed to collect surcharges and
22	monetary penalties. All fees and penalties collected must be deposited into DOH's Administrative Trust Fund.
23	The bill repeals s. 395.4035, F.S., relating to the Trauma
24 Services Trust Fund.	Services frust fulla.
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