By Senator Grimsley

	21-01447-14 20141276
1	A bill to be entitled
2	An act relating to trauma service areas; amending s.
3	395.402, F.S.; requiring the Department of Health to
4	provide an annual report assessing the trauma system;
5	revising factors for the department to consider when
6	conducting the assessment; limiting the total number
7	of trauma centers for each trauma service area;
8	deleting a provision that limits the total trauma
9	areas allowed in the state; reconfiguring certain
10	trauma service areas; amending s. 395.4025, F.S.;
11	revising application requirements for the department
12	to consider when selecting a hospital to be recognized
13	as a trauma center; deleting a provision relating to
14	the procedure for protesting an application decision
15	by the department; conforming cross-references;
16	requiring the department to redesignate certain
17	hospitals as Level II trauma centers; providing an
18	exception; providing an effective date.
19	
20	Be It Enacted by the Legislature of the State of Florida:
21	
22	Section 1. Section 395.402, Florida Statutes, is amended to
23	read:
24	395.402 Trauma service areas; number and location of trauma
25	centers
26	(1) The Legislature recognizes the need for a statewide,
27	cohesive, uniform, and integrated trauma system. Within the
28	trauma service areas, Level I and Level II trauma centers shall
29	each be capable of annually treating a minimum of 1,000 and 500
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21-01447-14 20141276 30 patients, respectively, with an injury severity score (ISS) of 9 31 or greater. Level II trauma centers in counties with a population of more than 500,000 shall have the capacity to care 32 33 for 1,000 patients per year. 34 (2) Trauma service areas as defined in this section are to be used by utilized until the Department of Health to complete 35 36 completes an annual assessment of the trauma system. This 37 assessment shall be reported and reports its finding to the 38 Governor, the President of the Senate, the Speaker of the House 39 of Representatives, and the substantive legislative committees. 40 The report shall be submitted by February 1 of each year, 2005. The department shall review the existing trauma system and 41 42 determine whether it is effective in providing trauma care 43 uniformly throughout the state. The assessment shall: 44 (a) Consider aligning trauma service areas within the 45 trauma region boundaries as established in July 2004. 46 (a) (b) Review the number and level of trauma centers needed 47 for each trauma service area to provide a statewide integrated 48 trauma system. 49 (b) (c) Identify Establish criteria used for determining the number and level of trauma centers needed to serve the 50 51 population in a defined trauma service area or region. 52 (d) Consider including criteria within trauma center 53 approval standards based upon the number of trauma victims served within a service area. 54 55 (c) (e) Evaluate the level of integration of Review the 56 Regional Domestic Security Task Force structure and determine 57 whether integrating the trauma system planning with interagency regional emergency and disaster planning efforts is feasible and 58 Page 2 of 10

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59	identify any action needed to reduce duplication of planning
60	efforts and to promote effective response to mass casualty
61	events between the two entities.
62	(d) (f) Report the amounts, sources, and uses of financial
63	support for the trauma system Make recommendations regarding a
64	continued revenue source which shall include a local
65	participation requirement.
66	<u>(e)</u> Make recommendations regarding the a formula for the
67	distribution of <u>state</u> funds identified for trauma centers which
68	shall address incentives for new centers where needed and the
69	need to maintain effective trauma care in areas served by
70	existing centers, with consideration for the volume of trauma
71	patients served, and the amount of charity care provided.
72	(3) In conducting <u>the annual</u> such assessment and subsequent
73	annual reviews, the department shall consider:
74	(a) The Recommendations made as part of the regional trauma
75	system plans submitted by regional trauma agencies.
76	(b) Stakeholder recommendations.
77	(c) The performance of the trauma system compared to
78	specific standards for access and quality geographical
79	composition of an area to ensure rapid access to trauma care by
80	patients.
81	(d) Historical patterns of patient referral and transfer in
82	an area.
83	(e) Inventories of available trauma care resources,
84	including professional medical staff.
85	(f) Population growth characteristics.
86	(g) Transportation capabilitics, including ground and air
87	transport.

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88	(h) Medically appropriate ground and air travel times.
89	(i) Recommendations of the Regional Domestic Security Task
90	Force.
91	(j) The actual number of trauma victims currently being
92	served by each trauma center.
93	(k) Other appropriate criteria.
94	(4) Annually thereafter, the department shall review the
95	assignment of the 67 counties to trauma service areas, in
96	addition to the requirements of paragraphs (2)(b)-(g) and
97	subsection (3). County assignments are made for the purpose of
98	developing a system of trauma centers. Revisions made by the
99	department shall take into consideration the recommendations
100	made as part of the regional trauma system plans approved by the
101	department and the recommendations made as part of the state
102	trauma system plan. In cases where a trauma service area is
103	located within the boundaries of more than one trauma region,
104	the trauma service area's needs, response capability, and system
105	requirements shall be considered by each trauma region served by
106	that trauma service area in its regional system plan. Until the
107	department completes the February 2005 assessment, the
108	assignment of counties shall remain as established in this
109	section.
110	<u>(4)</u> The following trauma service areas are hereby
111	established:
112	<u>(a)</u> 1. Trauma service area 1 shall consist of Escambia,
113	Okaloosa, Santa Rosa, and Walton Counties.
114	(b) 2. Trauma service area 2 shall consist of Bay, Gulf,
115	Holmes, and Washington Counties.
116	<u>(c)</u> 3. Trauma service area 3 shall consist of Calhoun,
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117	Franklin, Gadsden, Jackson, Jefferson, Leon, Liberty, Madison,
118	Taylor, and Wakulla Counties.
119	(d)4. Trauma service area 4 shall consist of Alachua,
120	Bradford, Columbia, Dixie, Gilchrist, Hamilton, Lafayette, Levy,
121	Putnam, Suwannee, and Union Counties.
122	<u>(e)</u> 5. Trauma service area 5 shall consist of Baker, Clay,
123	Duval, Nassau, and St. Johns Counties.
124	<u>(f)</u> 6. Trauma service area 6 shall consist of Citrus,
125	Hernando, and Marion Counties.
126	(g) 7. Trauma service area 7 shall consist of Flagler and
127	Volusia Counties.
128	<u>(h)</u> 8. Trauma service area 8 shall consist of Lake, Orange,
129	Osceola, Seminole, and Sumter Counties.
130	<u>(i)</u> 9. Trauma service area 9 shall consist of Pasco and
131	Pinellas Counties.
132	<u>(j)</u> 10. Trauma service area 10 shall consist of Hillsborough
133	County.
134	(k) 11. Trauma service area 11 shall consist of Hardee,
135	Highlands, and Polk Counties.
136	(1) 12. Trauma service area 12 shall consist of Brevard and
137	Indian River Counties.
138	(m) 13. Trauma service area 13 shall consist of <u>Charlotte</u> ,
139	DeSoto, Manatee, and Sarasota Counties.
140	(n) 14. Trauma service area 14 shall consist of Martin,
141	Okeechobee, and St. Lucie Counties.
142	<u>(o)</u> 15. Trauma service area 15 shall consist of <u>Collier</u> ,
143	Charlotte, Glades, Hendry, and Lee Counties.
144	<u>(p)</u> 16. Trauma service area 16 shall consist of Palm Beach
145	County.

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CODING: Words stricken are deletions; words underlined are additions.

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21-01447-14 20141276 146 17. Trauma service area 17 shall consist of Collier County. (q)18. Trauma service area 17 18 shall consist of Broward 147 148 County. (r)19. Trauma service area 18 19 shall consist of Miami-149 150 Dade and Monroe Counties. 151 (5) (b) Each trauma service area should have at least one 152 Level I or Level II trauma center. The department shall 153 allocate, by rule, The total number of trauma centers, including 154 both Level I and Level II trauma centers, permitted in needed 155 for each trauma service area is limited as follows: one center in areas 2, 3, 4, 7, 11, 12, 14, and 15; two centers in areas 5, 156 157 6, 10, 13, and 16; and three centers in areas 1, 8, 9, 17, and 158 18. An area may not have more than 3 centers. An additional 159 Level I or Level II center may not be approved if located less 160 than 10 miles from an existing Level I or Level II center. 161 (c) There shall be no more than a total of 44 trauma 162 centers in the state. 163 Section 2. Present subsections (8) through (12) of section 164 395.4025, Florida Statutes, are redesignated as subsections (7) 165 through (11), respectively, subsection (1), paragraphs (c) and 166 (d) of subsection (2), and present subsection (7) of that 167 section are amended, present subsections (13) and (14) of that section are redesignated as subsections (12) and (13), 168 respectively, and amended, and a new subsection (14) is added to 169 that section, to read: 170 171 395.4025 Trauma centers; selection; quality assurance; records.-172 173 (1) For purposes of developing a system of trauma centers, the department shall use the 19 trauma service areas established 174 Page 6 of 10

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175	in s. 395.402. Within each service area and based on the state
176	trauma system plan, the local or regional trauma services system
177	plan, and recommendations of the local or regional trauma
178	agency, the department shall establish the approximate number of
179	trauma centers needed to ensure reasonable access to high-
180	quality trauma services. The department shall select those
181	hospitals that are to be recognized as trauma centers, based on
182	documentation of the hospital's ability to meet established
183	quality standards.
184	(2)
185	(c) In order to be considered by the department,
186	applications from those hospitals seeking selection as trauma
187	centers, including those current verified trauma centers that
188	seek a change or redesignation in approval status as a trauma
189	center, must be received by the department no later than the
190	close of business on April 1. The department shall conduct a
191	provisional review of each application for the purpose of
192	determining that the hospital's application is complete and that
193	the hospital has the critical elements required for a trauma
194	center. This critical review will be based on trauma center
195	standards and shall determine include, but not be limited to, a
196	review of whether the hospital has:
197	1. Equipment and physical facilities necessary to provide
198	trauma services.
199	2. Personnel in sufficient numbers and with proper
200	qualifications to provide trauma services.
201	3. An effective quality assurance process.
202	4. Submitted written confirmation by the local or regional
203	trauma agency that the hospital applying to become a trauma
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21-01447-14 20141276 204 center is consistent with the plan of the local or regional 205 trauma agency, as approved by the department, if such agency 206 exists. 207 (d)1. Notwithstanding other provisions in this section, the 208 department may grant up to an additional 18 months to a hospital 209 applicant that is unable to meet all requirements as provided in 210 paragraph (c) at the time of application if the number of 211 applicants in the service area in which the applicant is located is equal to or less than the service area allocation, under s. 212 213 395.402(4) as provided by rule of the department. An applicant 214 that is granted additional time under pursuant to this paragraph 215 shall submit a plan for departmental approval which includes 216 timelines and activities that the applicant proposes to complete 217 in order to meet application requirements. An Any applicant that demonstrates an ongoing effort to complete the activities within 218 219 the timelines outlined in the plan shall be included in the 220 number of trauma centers at such time that the department has 221 conducted a provisional review of the application and has 222 determined that the application is complete and that the 223 hospital has the critical elements required for a trauma center. 224 2. Timeframes provided in subsections (1) - (7) (8) shall be

222 stayed until the department determines that the application is 226 complete and that the hospital has the critical elements 227 required for a trauma center.

(7) Any hospital that wishes to protest a decision made by the department based on the department's preliminary or in-depth review of applications or on the recommendations of the site visit review team pursuant to this section shall proceed as provided in chapter 120. Hearings held under this subsection

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21-01447-14 20141276 233 shall be conducted in the same manner as provided in ss. 120.569 234 and 120.57. Cases filed under chapter 120 may combine all 235 disputes between parties. 236 (12) (13) The department may adopt, by rule, the procedures 237 and process by which it will select trauma centers. Such 238 procedures and process must be used in annually selecting trauma 239 centers and must be consistent with subsections (1) - (7) (8) 240 except in those situations in which it is in the best interest of, and mutually agreed to by, all applicants within a service 241 242 area and the department to reduce the timeframes. 243 (13) (14) Notwithstanding the procedures established pursuant to subsections (1)-(12) through (13), hospitals located 244 245 in areas with limited access to trauma center services shall be 246 designated by the department as Level II trauma centers based on documentation of a valid certificate of trauma center 247 248 verification from the American College of Surgeons. Areas with 249 limited access to trauma center services are defined by the 250 following criteria: 251 (a) The hospital is located in a trauma service area with a 252 population greater than 600,000 persons but a population density 253 of less than 225 persons per square mile; 254 (b) The hospital is located in a county with no verified 255 trauma center; and 256 (c) The hospital is located at least 15 miles or 20 minutes 257 travel time by ground transport from the nearest verified trauma 2.58 center. 259 (14) If a hospital has operated continuously as a Level II 260 trauma center for a consecutive 12-month period and is in operation on July 1, 2014, the department shall within 30 days 261

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262	after a request by the hospital, redesignate such a hospital as
263	a Level II trauma center if such hospital has met the
264	requirements of subsections (5) and (6) with regard to quality
265	of care and patient outcomes. The department shall designate any
266	such hospital as a Level II trauma center if the redesignation
267	of the hospital does not cause the total number of trauma
268	centers in the trauma service area to exceed the number
269	specified in s. 395.402(5). A hospital that meets the
270	requirements of this section shall be eligible for renewal of
271	the 7-year approval period as provided in subsection (6).
272	Section 3. This act shall take effect July 1, 2014.