By the Committees on Appropriations; and Health Policy; and Senator Grimsley

576-04213-14 20141276c2

A bill to be entitled

An act relating to trauma service centers; amending s. 395.401, F.S.; limiting trauma service fees to a certain amount; providing for future expiration; amending s. 395.402, F.S.; requiring the Department of Health to convene the Florida Trauma System Plan Advisory Council by a specified date; requiring the Florida Trauma System Plan Advisory Council to review the Trauma System Consultation Report and make recommendations to the Legislature by a specified date; authorizing the Florida Trauma System Plan Advisory Council to make recommendations to the State Surgeon General; designating the membership of the advisory council; amending s. 395.4025, F.S.; deleting a provision relating to the procedure for protesting an application decision by the department; conforming cross-references; authorizing certain provisional and verified trauma centers to continue operating and to apply for renewal; restricting the department from verifying, designating, or provisionally approving hospitals as trauma centers; providing for future expiration; providing an effective date.

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Be It Enacted by the Legislature of the State of Florida:

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Section 1. Present paragraphs (k) through (o) of subsection (1) of section 395.401, Florida Statutes, are redesignated as paragraphs (l) through (p), respectively, and a new paragraph (k) is added to that subsection, to read:

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centers and pediatric trauma centers; procedures; renewal.-(1)(k) No hospital operating a trauma center may charge a trauma activation fee greater than \$15,000. This paragraph expires on July 1, 2015. Section 2. Subsection (5) is added to section 395.402, Florida Statutes, to read: 395.402 Trauma service areas; number and location of trauma centers.-(5) No later than October 1, 2014, the department must convene the Florida Trauma System Plan Advisory Council in order to review the Trauma System Consultation Report issued by the American College of Surgeons Committee on Trauma dated February 2-5, 2013. Based on this review, the advisory council must submit recommendations, including recommended statutory changes, to the President of the Senate and the Speaker of the House of

395.401 Trauma services system plans; approval of trauma

(a) A trauma patient, or a family member of a trauma patient, who has sustained and recovered from severe injuries;

Representatives by February 1, 2015. The advisory council may

continuing development of the Florida trauma system. The

advisory council will consist of nine representatives of an

make recommendations to the State Surgeon General regarding the

inclusive trauma system appointed by the State Surgeon General.

- (b) A member of the Florida Committee on Trauma;
- (c) A member of the Association of Florida Trauma
 Coordinators;

These nine representatives must be as follows:

(d) A CEO of a nontrauma, acute care hospital who is a

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member of the Florida Hospital Association;

- (e) A member of the Florida Emergency Medical Services Advisory Council;
- (f) A member of the Florida Injury Prevention Advisory Council;
- (g) A member of the Brain and Spinal Cord Injury Program Advisory Council;
 - (h) A member of the Florida Chamber of Commerce; and
- $\underline{\mbox{(i) A member of the Florida Health Insurance Advisory}} \label{eq:board.}$ Board.

Section 3. Present subsections (8) through (12) of section 395.4025, Florida Statutes, are redesignated as subsections (7) through (11), respectively, paragraph (d) of subsection (2) and present subsection (7) of that section are amended, present subsections (13) and (14) of that section are redesignated as subsections (12) and (13), respectively, and amended, and new subsections (14) and (15) are added to that section, to read:

395.4025 Trauma centers; selection; quality assurance; records.—

(2)

(d)1. Notwithstanding other provisions in this section, the department may grant up to an additional 18 months to a hospital applicant that is unable to meet all requirements as provided in paragraph (c) at the time of application if the number of applicants in the service area in which the applicant is located is equal to or less than the service area allocation, as provided by rule of the department. An applicant that is granted additional time <u>under pursuant to</u> this paragraph shall submit a plan for departmental approval which includes timelines and

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activities that the applicant proposes to complete in order to meet application requirements. An Any applicant that demonstrates an ongoing effort to complete the activities within the timelines outlined in the plan shall be included in the number of trauma centers at such time that the department has conducted a provisional review of the application and has determined that the application is complete and that the hospital has the critical elements required for a trauma center.

- 2. Timeframes provided in subsections (1)-(7) (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 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 shall be conducted in the same manner as provided in ss. 120.569 and 120.57. Cases filed under chapter 120 may combine all disputes between parties.
- (12) (13) The department may adopt, by rule, the procedures and process by which it will select trauma centers. Such procedures and process must be used in annually selecting trauma centers and must be consistent with subsections (1)-(7) (1)-(8) except in those situations in which it is in the best interest of, and mutually agreed to by, all applicants within a service area and the department to reduce the timeframes.
- $\underline{(13)}$ (14) Notwithstanding the procedures established pursuant to subsections (1)-(12) (1) through (13), hospitals

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located in areas with limited access to trauma center services
shall be designated by the department as Level II trauma centers
based on documentation of a valid certificate of trauma center
verification from the American College of Surgeons. Areas with
limited access to trauma center services are defined by the
following criteria:

- (a) The hospital is located in a trauma service area with a population greater than 600,000 persons but a population density of less than 225 persons per square mile;
- (b) The hospital is located in a county with no verified trauma center; and
- (c) The hospital is located at least 15 miles or 20 minutes travel time by ground transport from the nearest verified trauma center.
- (14) Notwithstanding any other law, a hospital designated as a provisional or verified as a Level I, Level II, or pediatric trauma center after the enactment of chapter 2004-259, Laws of Florida, whose approval has not been revoked may continue to operate at the same trauma center level as a Level I, Level II, or pediatric trauma center until the approval period in subsection (6) expires, as long as the hospital continues to meet the other requirements of part II of this chapter, related to trauma center standards and patient outcomes. Any hospital that meets the requirements of this section is eligible for renewal of its 7-year approval period pursuant to subsection (6).
- (15) The department may not verify, designate, or provisionally approve any hospital to operate as a trauma center through the procedures established in subsections (1)-(13). This

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46	subse	ection ex	кріг	res Ju	ıly 1	L, 2015	<u>.</u>						
47		Section	4.	This	act	shall	take	effect	July	1,	2014.		

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