

By Senator Brandes

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1 A bill to be entitled
2 An act relating to government data practices; amending
3 s. 257.36, F.S.; requiring the Division of Library and
4 Information Services of the Department of State to
5 adopt rules providing procedures for an agency to
6 establish schedules for the physical destruction or
7 other disposal of records containing personal
8 identification information; creating part IV of ch.
9 282, F.S., consisting of s. 282.801, F.S.; providing
10 definitions; requiring an agency that collects and
11 maintains personal identification information to post
12 a privacy policy on the agency's website; prescribing
13 minimum requirements for a privacy policy; requiring
14 an agency to provide notice of the installation of
15 cookies on an individual's computer; requiring that an
16 individual who would otherwise be granted access to an
17 agency's website be granted access even if he or she
18 declines to have the cookie installed; providing an
19 exception; requiring that privacy policy requirements
20 be specified in a contract between a public agency and
21 a contractor; specifying that a violation does not
22 create a civil cause of action; requiring the Office
23 of Program Policy Analysis and Government
24 Accountability to submit a report to the Legislature
25 by a specified date; providing report requirements;
26 requiring the Agency for Health Care Administration to
27 provide specified data on assisted living facilities
28 by a certain date; providing minimum requirements for
29 such data; authorizing the agency to create a comment

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30 webpage regarding assisted living facilities;
31 providing minimum requirements; authorizing the agency
32 to provide links to certain third-party websites;
33 authorizing the agency to adopt rules; amending s.
34 408.05, F.S.; dissolving the Center for Health
35 Information and Policy Analysis within the Agency for
36 Health Care Administration; requiring the agency to
37 coordinate a system to promote access to certain data
38 and information; requiring that certain health-related
39 data be included within the system; assigning duties
40 to the agency relating to the collection and
41 dissemination of data; establishing conditions for the
42 funding of the system; requiring the Office of Program
43 Policy Analysis and Government Accountability to
44 monitor the agency's implementation of the health
45 information system; requiring the Office of Program
46 Policy Analysis and Government Accountability to
47 submit a report to the Legislature after completion of
48 the implementation; providing report requirements;
49 reenacting s. 120.54(8), F.S., relating to rulemaking,
50 to incorporate the amendment made to s. 257.36, F.S.,
51 in a reference thereto; amending ss. 20.42, 381.026,
52 395.301, 395.602, 395.6025, 408.07, 408.18, 465.0244,
53 627.6499, and 641.54, F.S.; conforming provisions to
54 changes made by the act; providing an effective date.

55
56 Be It Enacted by the Legislature of the State of Florida:

57
58 Section 1. Subsection (6) of section 257.36, Florida

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59 Statutes, is amended to read:

60 257.36 Records and information management.—

61 (6) A public record may be destroyed or otherwise disposed
62 of only in accordance with retention schedules established by
63 the division. The division shall adopt ~~reasonable~~ rules
64 consistent not inconsistent with this chapter which are ~~shall be~~
65 binding on all agencies relating to the destruction and
66 disposition of records. Such rules must ~~shall~~ provide, but need
67 not be limited to:

68 (a) Procedures for complying and submitting to the division
69 records-retention schedules.

70 (b) Procedures for the physical destruction or other
71 disposal of records.

72 (c) Procedures for an agency to establish schedules for the
73 physical destruction or other disposal of records held by the
74 agency which contain personal identification information, as
75 defined in s. 282.801, after meeting retention requirements.
76 Unless otherwise required by law, an agency may indefinitely
77 retain records containing information that is not identifiable
78 as related to a unique individual.

79 (d)(e) Standards for the reproduction of records for
80 security or with a view to the disposal of the original record.

81 Section 2. Part IV of chapter 282, Florida Statutes,
82 consisting of section 282.801, Florida Statutes, is created to
83 read:

84 PART IV

85 GOVERNMENT DATA COLLECTION PRACTICES

86 282.801 Government data practices.—

87 (1) For purposes of this part, the term:

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88 (a) "Agency" has the same meaning as in s. 119.011.

89 (b) "Cookie" means data sent from a website which is
90 electronically installed on a computer or electronic device of
91 an individual who has accessed the website and transmits certain
92 information to the server of that website.

93 (c) "Individual" means a human being and does not include a
94 corporation, a partnership, or any other business entity.

95 (d) "Personal identification information" means an item,
96 collection, or grouping of information that may be used, alone
97 or in conjunction with other information, to identify a unique
98 individual, including, but not limited to, his or her:

99 1. Name;

100 2. Postal or e-mail address;

101 3. Telephone number;

102 4. Social security number;

103 5. Date of birth;

104 6. Mother's maiden name;

105 7. Official state-issued or United States-issued driver
106 license or identification number, alien registration number,
107 government passport number, employer or taxpayer identification
108 number, or Medicaid or food assistance account number;

109 8. Bank account number, credit or debit card number, or
110 other number or information that can be used to access an
111 individual's financial resources;

112 9. Educational records;

113 10. Medical records;

114 11. License plate number of a registered motor vehicle;

115 12. Images, including facial images;

116 13. Biometric identification information;

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117 14. Criminal history; or

118 15. Employment history.

119 (2) An agency that collects personal identification
120 information through a website and retains such information shall
121 maintain and conspicuously post a privacy policy on such
122 website. At a minimum, the privacy policy must provide:

123 (a) A description of the services the website provides.

124 (b) A description of the personal identification
125 information that the agency collects and maintains from an
126 individual accessing or using the website.

127 (c) An explanation of whether the agency's data collecting
128 and sharing practices are mandatory or allow a user to opt out
129 of those practices.

130 (d) Any available alternatives to using the website.

131 (e) A statement as to how the agency uses the personal
132 identification information, including, but not limited to,
133 whether and under what circumstances the agency discloses such
134 information.

135 (f) Whether any other person, as defined in s. 671.201,
136 collects personal identification information through the
137 website.

138 (g) A general description of the security measures in place
139 to protect personal identification information; however, such
140 description must not compromise the integrity of the security
141 measures.

142 (h) An explanation of public records requirements relating
143 to the personal identification information of an individual
144 using the website and if such information may be disclosed in
145 response to a public records request.

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146 (3) (a) An agency that uses a website to install a cookie on
147 an individual's computer or electronic device shall inform an
148 individual accessing the website of the use of cookies and
149 request permission to install a cookie on the individual's
150 computer.

151 (b) If an individual accessing the website of an agency
152 declines to have cookies installed, such individual shall still
153 be allowed to access and use the website.

154 (c) This subsection does not apply to a cookie temporarily
155 installed on an individual's computer or electronic device by an
156 agency if the cookie is installed only in the computer's or
157 electronic device's memory and is deleted from such memory when
158 the website browser or website application is closed.

159 (4) Any contract between a public agency, as defined in s.
160 119.0701(1) (b), and a contractor, as defined in s.
161 119.0701(1) (a), must specify that the contractor must comply
162 with the requirements in subsections (2) and (3).

163 (5) The failure of an agency to comply with this section
164 does not create a civil cause of action.

165 Section 3. The Office of Program Policy Analysis and
166 Government Accountability shall submit a report to the President
167 of the Senate and the Speaker of the House of Representatives by
168 July 1, 2015, which:

169 (1) Identifies personal identification information, as
170 defined in s. 282.801, Florida Statutes, and the records in
171 which such information is contained, held by an agency of the
172 executive or legislative branch of state government.

173 (2) Describes the processes by which an individual may
174 currently view and verify his or her personal identification

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175 information held by an agency, including how an individual may
176 request the correction of incorrect personal identification
177 information.

178 (3) Identifies any obstacles that inhibit an individual's
179 access to such records.

180 Section 4. (1) By November 1, 2014, the Agency for Health
181 Care Administration shall provide electronic access to data on
182 assisted living facilities. Such data must be searchable,
183 downloadable, and available in generally accepted formats. At a
184 minimum, such data must include:

185 (a) Information on each assisted living facility licensed
186 under part I of chapter 429, Florida Statutes, including:

- 187 1. The name and address of the facility.
- 188 2. The number and type of licensed beds in the facility.
- 189 3. The types of licenses held by the facility.
- 190 4. The facility's license expiration date and status.
- 191 5. Other relevant information that the agency currently
192 collects.

193 (b) A list of the facility's violations, including, for
194 each violation:

- 195 1. A summary of the violation presented in a manner
196 understandable by the general public;
- 197 2. Any sanctions imposed by final order; and
- 198 3. The date the corrective action was confirmed by the
199 agency.

200 (c) Links to inspection reports on file with the agency.

201 (2) (a) The agency may provide a monitored comment webpage
202 that allows members of the public to comment on specific
203 assisted living facilities licensed to operate in this state. At

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204 a minimum, the comment webpage must allow members of the public
205 to identify themselves, provide comments on their experiences
206 with, or observations of, an assisted living facility, and view
207 others' comments.

208 (b) The agency shall review comments for profane content
209 and redact such content before posting the comments to the
210 webpage. After redacting profane content, the agency shall post
211 all comments, and shall retain all comments as they were
212 originally submitted, which are subject to the requirements of
213 chapter 119, Florida Statutes, and which shall be retained by
214 the agency for inspection by the public without further
215 redaction pursuant to retention schedules and disposal processes
216 for such records.

217 (c) A controlling interest, as defined in s. 408.803,
218 Florida Statutes, in an assisted living facility, or an employee
219 or owner of an assisted living facility, is prohibited from
220 posting comments on the page. A controlling interest, employee,
221 or owner may respond to comments on the page, and the agency
222 shall ensure that such responses are identified as being from a
223 representative of the facility.

224 (3) The agency may provide links to third-party websites
225 that use the data published pursuant to this section to assist
226 consumers in evaluating the quality of care and service in
227 assisted living facilities.

228 (4) The agency may adopt rules to administer this section.

229 Section 5. Section 408.05, Florida Statutes, is amended to
230 read:

231 408.05 Florida Health Information Transparency Initiative
232 ~~Center for Health Information and Policy Analysis.~~

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233 (1) CREATION AND PURPOSE ESTABLISHMENT.—The agency shall
234 create a comprehensive health information system to promote
235 accessibility, transparency, and utility of state-collected data
236 and information about health providers, facilities, services,
237 and payment sources. The agency is responsible for making state-
238 collected health data available in a manner that allows for and
239 encourages multiple and innovative uses of data sets. Subject to
240 funding by the General Appropriations Act, the agency shall
241 develop and deploy, through a contract award with one or more
242 vendors or internal development, new methods of dissemination
243 and ways to convert data into easily usable electronic formats
244 ~~establish a Florida Center for Health Information and Policy~~
245 ~~Analysis. The center shall establish a comprehensive health~~
246 ~~information system to provide for the collection, compilation,~~
247 ~~coordination, analysis, indexing, dissemination, and utilization~~
248 ~~of both purposefully collected and extant health-related data~~
249 ~~and statistics. The center shall be staffed with public health~~
250 ~~experts, biostatisticians, information system analysts, health~~
251 ~~policy experts, economists, and other staff necessary to carry~~
252 ~~out its functions.~~

253 (2) HEALTH-RELATED DATA.—The comprehensive health
254 information system must include the following data and
255 information ~~operated by the Florida Center for Health~~
256 ~~Information and Policy Analysis shall identify the best~~
257 ~~available data sources and coordinate the compilation of extant~~
258 ~~health-related data and statistics and purposefully collect data~~
259 ~~on:~~

260 ~~(a) The extent and nature of illness and disability of the~~
261 ~~state population, including life expectancy, the incidence of~~

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262 ~~various acute and chronic illnesses, and infant and maternal~~
263 ~~morbidity and mortality.~~

264 ~~(b) The impact of illness and disability of the state~~
265 ~~population on the state economy and on other aspects of the~~
266 ~~well-being of the people in this state.~~

267 ~~(c) Environmental, social, and other health hazards.~~

268 ~~(d) Health knowledge and practices of the people in this~~
269 ~~state and determinants of health and nutritional practices and~~
270 ~~status.~~

271 ~~(a)(e) Health resources, including licensed health~~
272 ~~professionals, licensed health care facilities, managed care~~
273 ~~organizations, and other health services regulated or funded by~~
274 ~~the state physicians, dentists, nurses, and other health~~
275 ~~professionals, by specialty and type of practice and acute,~~
276 ~~long-term care and other institutional care facility supplies~~
277 ~~and specific services provided by hospitals, nursing homes, home~~
278 ~~health agencies, and other health care facilities.~~

279 ~~(b)(f) Utilization of health resources care by type of~~
280 ~~provider.~~

281 ~~(c)(g) Health care costs and financing, including Medicaid~~
282 ~~claims and encounter data and data from other public and private~~
283 ~~payors trends in health care prices and costs, the sources of~~
284 ~~payment for health care services, and federal, state, and local~~
285 ~~expenditures for health care.~~

286 ~~(h) Family formation, growth, and dissolution.~~

287 ~~(d)(i) The extent, source, and type of public and private~~
288 ~~health insurance coverage in this state.~~

289 ~~(e)(j) The data necessary for measuring value and quality~~
290 ~~of care provided by various health care providers, including~~

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291 applicable credentials, accreditation status, use, revenues and
292 expenses, outcomes, site visits, and other regulatory reports,
293 and the results of administrative and civil litigation related
294 to health care.

295 (3) COORDINATION ~~COMPREHENSIVE HEALTH INFORMATION SYSTEM.~~
296 In order to collect comprehensive ~~produce comparable and uniform~~
297 health information and statistics and to disseminate such
298 information to for the public, as well as for the development of
299 policy recommendations, the agency shall perform the following
300 functions:

301 (a) Collect and compile data from all agencies and programs
302 that provide, regulate, and pay for health services ~~Coordinate~~
303 ~~the activities of state agencies involved in the design and~~
304 ~~implementation of the comprehensive health information system.~~

305 (b) Promote data sharing through the ~~Undertake research,~~
306 development, dissemination, and evaluation of state-collected
307 health data and by making such data available, transferable, and
308 readily usable ~~respecting the comprehensive health information~~
309 ~~system.~~

310 (c) ~~Review the statistical activities of state agencies to~~
311 ~~ensure that they are consistent with the comprehensive health~~
312 ~~information system.~~

313 (c) ~~(d)~~ Develop written agreements with local, state, and
314 federal agencies for the sharing of health-care-related data or
315 using the facilities and services of such agencies. State
316 agencies, local health councils, and other agencies under state
317 contract shall assist the agency center in obtaining, compiling,
318 and transferring health-care-related data maintained by state
319 and local agencies. ~~Written agreements must specify the types,~~

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320 ~~methods, and periodicity of data exchanges and specify the types~~
321 ~~of data that will be transferred to the center.~~

322 (d)(e) Enable and facilitate the sharing and use of all
323 state-collected health data to the maximum extent allowed by law
324 ~~Establish by rule the types of data collected, compiled,~~
325 ~~processed, used, or shared. Decisions regarding center data sets~~
326 ~~should be made based on consultation with the State Consumer~~
327 ~~Health Information and Policy Advisory Council and other public~~
328 ~~and private users regarding the types of data which should be~~
329 ~~collected and their uses. The center shall establish~~
330 ~~standardized means for collecting health information and~~
331 ~~statistics under laws and rules administered by the agency.~~

332 ~~(f) Establish minimum health-care-related data sets which~~
333 ~~are necessary on a continuing basis to fulfill the collection~~
334 ~~requirements of the center and which shall be used by state~~
335 ~~agencies in collecting and compiling health-care-related data.~~
336 ~~The agency shall periodically review ongoing health care data~~
337 ~~collections of the Department of Health and other state agencies~~
338 ~~to determine if the collections are being conducted in~~
339 ~~accordance with the established minimum sets of data.~~

340 ~~(g) Establish advisory standards to ensure the quality of~~
341 ~~health statistical and epidemiological data collection,~~
342 ~~processing, and analysis by local, state, and private~~
343 ~~organizations.~~

344 (e)(h) Monitor data collection procedures, test data
345 quality, and take such corrective actions as are necessary to
346 ensure that data and information disseminated under the
347 initiative are accurate, valid, reliable, and complete ~~Prescribe~~
348 ~~standards for the publication of health-care-related data~~

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349 ~~reported pursuant to this section which ensure the reporting of~~
350 ~~accurate, valid, reliable, complete, and comparable data. Such~~
351 ~~standards should include advisory warnings to users of the data~~
352 ~~regarding the status and quality of any data reported by or~~
353 ~~available from the center.~~

354 (f)(i) Initiate and maintain activities necessary to
355 collect, edit, verify, archive, and retrieve data compiled
356 pursuant to this section ~~Prescribe standards for the maintenance~~
357 ~~and preservation of the center's data. This should include~~
358 ~~methods for archiving data, retrieval of archived data, and data~~
359 ~~editing and verification.~~

360 ~~(j) Ensure that strict quality control measures are~~
361 ~~maintained for the dissemination of data through publications,~~
362 ~~studies, or user requests.~~

363 ~~(k) Develop, in conjunction with the State Consumer Health~~
364 ~~Information and Policy Advisory Council, and implement a long-~~
365 ~~range plan for making available health care quality measures and~~
366 ~~financial data that will allow consumers to compare health care~~
367 ~~services. The health care quality measures and financial data~~
368 ~~the agency must make available include, but are not limited to,~~
369 ~~pharmaceuticals, physicians, health care facilities, and health~~
370 ~~plans and managed care entities. The agency shall update the~~
371 ~~plan and report on the status of its implementation annually.~~
372 ~~The agency shall also make the plan and status report available~~
373 ~~to the public on its Internet website. As part of the plan, the~~
374 ~~agency shall identify the process and timeframes for~~
375 ~~implementation, barriers to implementation, and recommendations~~
376 ~~of changes in the law that may be enacted by the Legislature to~~
377 ~~eliminate the barriers. As preliminary elements of the plan, the~~

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378 agency shall:

379 ~~1. Make available patient safety indicators, inpatient~~
380 ~~quality indicators, and performance outcome and patient charge~~
381 ~~data collected from health care facilities pursuant to s.~~
382 ~~408.061(1) (a) and (2). The terms "patient safety indicators" and~~
383 ~~"inpatient quality indicators" have the same meaning as that~~
384 ~~ascribed by the Centers for Medicare and Medicaid Services, an~~
385 ~~accrediting organization whose standards incorporate comparable~~
386 ~~regulations required by this state, or a national entity that~~
387 ~~establishes standards to measure the performance of health care~~
388 ~~providers, or by other states. The agency shall determine which~~
389 ~~conditions, procedures, health care quality measures, and~~
390 ~~patient charge data to disclose based upon input from the~~
391 ~~council. When determining which conditions and procedures are to~~
392 ~~be disclosed, the council and the agency shall consider~~
393 ~~variation in costs, variation in outcomes, and magnitude of~~
394 ~~variations and other relevant information. When determining~~
395 ~~which health care quality measures to disclose, the agency:~~

396 ~~a. Shall consider such factors as volume of cases; average~~
397 ~~patient charges; average length of stay; complication rates;~~
398 ~~mortality rates; and infection rates, among others, which shall~~
399 ~~be adjusted for case mix and severity, if applicable.~~

400 ~~b. May consider such additional measures that are adopted~~
401 ~~by the Centers for Medicare and Medicaid Studies, an accrediting~~
402 ~~organization whose standards incorporate comparable regulations~~
403 ~~required by this state, the National Quality Forum, the Joint~~
404 ~~Commission on Accreditation of Healthcare Organizations, the~~
405 ~~Agency for Healthcare Research and Quality, the Centers for~~
406 ~~Disease Control and Prevention, or a similar national entity~~

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407 ~~that establishes standards to measure the performance of health~~
408 ~~care providers, or by other states.~~

409
410 ~~When determining which patient charge data to disclose, the~~
411 ~~agency shall include such measures as the average of~~
412 ~~undiscounted charges on frequently performed procedures and~~
413 ~~preventive diagnostic procedures, the range of procedure charges~~
414 ~~from highest to lowest, average net revenue per adjusted patient~~
415 ~~day, average cost per adjusted patient day, and average cost per~~
416 ~~admission, among others.~~

417 ~~2. Make available performance measures, benefit design, and~~
418 ~~premium cost data from health plans licensed pursuant to chapter~~
419 ~~627 or chapter 641. The agency shall determine which health care~~
420 ~~quality measures and member and subscriber cost data to~~
421 ~~disclose, based upon input from the council. When determining~~
422 ~~which data to disclose, the agency shall consider information~~
423 ~~that may be required by either individual or group purchasers to~~
424 ~~assess the value of the product, which may include membership~~
425 ~~satisfaction, quality of care, current enrollment or membership,~~
426 ~~coverage areas, accreditation status, premium costs, plan costs,~~
427 ~~premium increases, range of benefits, copayments and~~
428 ~~deductibles, accuracy and speed of claims payment, credentials~~
429 ~~of physicians, number of providers, names of network providers,~~
430 ~~and hospitals in the network. Health plans shall make available~~
431 ~~to the agency such data or information that is not currently~~
432 ~~reported to the agency or the office.~~

433 ~~3. Determine the method and format for public disclosure of~~
434 ~~data reported pursuant to this paragraph. The agency shall make~~
435 ~~its determination based upon input from the State Consumer~~

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436 ~~Health Information and Policy Advisory Council. At a minimum,~~
437 ~~the data shall be made available on the agency's Internet~~
438 ~~website in a manner that allows consumers to conduct an~~
439 ~~interactive search that allows them to view and compare the~~
440 ~~information for specific providers. The website must include~~
441 ~~such additional information as is determined necessary to ensure~~
442 ~~that the website enhances informed decisionmaking among~~
443 ~~consumers and health care purchasers, which shall include, at a~~
444 ~~minimum, appropriate guidance on how to use the data and an~~
445 ~~explanation of why the data may vary from provider to provider.~~

446 ~~4. Publish on its website undiscounted charges for no fewer~~
447 ~~than 150 of the most commonly performed adult and pediatric~~
448 ~~procedures, including outpatient, inpatient, diagnostic, and~~
449 ~~preventative procedures.~~

450 ~~(4) TECHNICAL ASSISTANCE.—~~

451 ~~(a) The center shall provide technical assistance to~~
452 ~~persons or organizations engaged in health planning activities~~
453 ~~in the effective use of statistics collected and compiled by the~~
454 ~~center. The center shall also provide the following additional~~
455 ~~technical assistance services:~~

456 ~~1. Establish procedures identifying the circumstances under~~
457 ~~which, the places at which, the persons from whom, and the~~
458 ~~methods by which a person may secure data from the center,~~
459 ~~including procedures governing requests, the ordering of~~
460 ~~requests, timeframes for handling requests, and other procedures~~
461 ~~necessary to facilitate the use of the center's data. To the~~
462 ~~extent possible, the center should provide current data timely~~
463 ~~in response to requests from public or private agencies.~~

464 ~~2. Provide assistance to data sources and users in the~~

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465 ~~areas of database design, survey design, sampling procedures,~~
466 ~~statistical interpretation, and data access to promote improved~~
467 ~~health-care-related data sets.~~

468 ~~3. Identify health care data gaps and provide technical~~
469 ~~assistance to other public or private organizations for meeting~~
470 ~~documented health care data needs.~~

471 ~~4. Assist other organizations in developing statistical~~
472 ~~abstracts of their data sets that could be used by the center.~~

473 ~~5. Provide statistical support to state agencies with~~
474 ~~regard to the use of databases maintained by the center.~~

475 ~~6. To the extent possible, respond to multiple requests for~~
476 ~~information not currently collected by the center or available~~
477 ~~from other sources by initiating data collection.~~

478 ~~7. Maintain detailed information on data maintained by~~
479 ~~other local, state, federal, and private agencies in order to~~
480 ~~advise those who use the center of potential sources of data~~
481 ~~which are requested but which are not available from the center.~~

482 ~~8. Respond to requests for data which are not available in~~
483 ~~published form by initiating special computer runs on data sets~~
484 ~~available to the center.~~

485 ~~9. Monitor innovations in health information technology,~~
486 ~~informatics, and the exchange of health information and maintain~~
487 ~~a repository of technical resources to support the development~~
488 ~~of a health information network.~~

489 ~~(b) The agency shall administer, manage, and monitor grants~~
490 ~~to not-for-profit organizations, regional health information~~
491 ~~organizations, public health departments, or state agencies that~~
492 ~~submit proposals for planning, implementation, or training~~
493 ~~projects to advance the development of a health information~~

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494 ~~network. Any grant contract shall be evaluated to ensure the~~
495 ~~effective outcome of the health information project.~~

496 ~~(c) The agency shall initiate, oversee, manage, and~~
497 ~~evaluate the integration of health care data from each state~~
498 ~~agency that collects, stores, and reports on health care issues~~
499 ~~and make that data available to any health care practitioner~~
500 ~~through a state health information network.~~

501 ~~(5) PUBLICATIONS; REPORTS; SPECIAL STUDIES. The center~~
502 ~~shall provide for the widespread dissemination of data which it~~
503 ~~collects and analyzes. The center shall have the following~~
504 ~~publication, reporting, and special study functions:~~

505 ~~(a) The center shall publish and make available~~
506 ~~periodically to agencies and individuals health statistics~~
507 ~~publications of general interest, including health plan consumer~~
508 ~~reports and health maintenance organization member satisfaction~~
509 ~~surveys; publications providing health statistics on topical~~
510 ~~health policy issues; publications that provide health status~~
511 ~~profiles of the people in this state; and other topical health~~
512 ~~statistics publications.~~

513 ~~(b) The center shall publish, make available, and~~
514 ~~disseminate, promptly and as widely as practicable, the results~~
515 ~~of special health surveys, health care research, and health care~~
516 ~~evaluations conducted or supported under this section. Any~~
517 ~~publication by the center must include a statement of the~~
518 ~~limitations on the quality, accuracy, and completeness of the~~
519 ~~data.~~

520 ~~(c) The center shall provide indexing, abstracting,~~
521 ~~translation, publication, and other services leading to a more~~
522 ~~effective and timely dissemination of health care statistics.~~

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523 ~~(d) The center shall be responsible for publishing and~~
524 ~~disseminating an annual report on the center's activities.~~

525 ~~(e) The center shall be responsible, to the extent~~
526 ~~resources are available, for conducting a variety of special~~
527 ~~studies and surveys to expand the health care information and~~
528 ~~statistics available for health policy analyses, particularly~~
529 ~~for the review of public policy issues. The center shall develop~~
530 ~~a process by which users of the center's data are periodically~~
531 ~~surveyed regarding critical data needs and the results of the~~
532 ~~survey considered in determining which special surveys or~~
533 ~~studies will be conducted. The center shall select problems in~~
534 ~~health care for research, policy analyses, or special data~~
535 ~~collections on the basis of their local, regional, or state~~
536 ~~importance; the unique potential for definitive research on the~~
537 ~~problem; and opportunities for application of the study~~
538 ~~findings.~~

539 ~~(4)-(6) PROVIDER DATA REPORTING.~~-This section does not
540 confer on the agency the power to demand or require that a
541 health care provider or professional furnish information,
542 records of interviews, written reports, statements, notes,
543 memoranda, or data other than as expressly required by law.

544 ~~(5)-(7) HEALTH INFORMATION ENTERPRISE BUDGET; FEES.~~

545 ~~(a) The agency shall implement the comprehensive health~~
546 ~~information system in a manner that recognizes state-collected~~
547 ~~data as an asset and rewards taxpayer investment in information~~
548 ~~collection and management Legislature intends that funding for~~
549 ~~the Florida Center for Health Information and Policy Analysis be~~
550 ~~appropriated from the General Revenue Fund.~~

551 ~~(b) The agency Florida Center for Health Information and~~

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552 ~~Policy Analysis~~ may apply for, and receive, and accept grants,
553 gifts, and other payments, including property and services, from
554 a any governmental or other public or private entity or person
555 and make arrangements for ~~as to~~ the use of such funds ~~same,~~
556 including the undertaking of special studies and other projects
557 relating to health-care-related topics. ~~Funds obtained pursuant~~
558 ~~to this paragraph may not be used to offset annual~~
559 ~~appropriations from the General Revenue Fund.~~

560 (c) The agency shall ensure that a vendor who enters into a
561 contract with the state under this section does not inhibit or
562 impede public access to state-collected health data and
563 information center may charge such reasonable fees for services
564 ~~as the agency prescribes by rule. The established fees may not~~
565 ~~exceed the reasonable cost for such services. Fees collected may~~
566 ~~not be used to offset annual appropriations from the General~~
567 ~~Revenue Fund.~~

568 ~~(8) STATE CONSUMER HEALTH INFORMATION AND POLICY ADVISORY~~
569 ~~COUNCIL.—~~

570 ~~(a) There is established in the agency the State Consumer~~
571 ~~Health Information and Policy Advisory Council to assist the~~
572 ~~center in reviewing the comprehensive health information system,~~
573 ~~including the identification, collection, standardization,~~
574 ~~sharing, and coordination of health-related data, fraud and~~
575 ~~abuse data, and professional and facility licensing data among~~
576 ~~federal, state, local, and private entities and to recommend~~
577 ~~improvements for purposes of public health, policy analysis, and~~
578 ~~transparency of consumer health care information. The council~~
579 ~~shall consist of the following members:~~

580 ~~1. An employee of the Executive Office of the Governor, to~~

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581 ~~be appointed by the Governor.~~

582 ~~2. An employee of the Office of Insurance Regulation, to be~~
583 ~~appointed by the director of the office.~~

584 ~~3. An employee of the Department of Education, to be~~
585 ~~appointed by the Commissioner of Education.~~

586 ~~4. Ten persons, to be appointed by the Secretary of Health~~
587 ~~Care Administration, representing other state and local~~
588 ~~agencies, state universities, business and health coalitions,~~
589 ~~local health councils, professional health-care-related~~
590 ~~associations, consumers, and purchasers.~~

591 ~~(b) Each member of the council shall be appointed to serve~~
592 ~~for a term of 2 years following the date of appointment, except~~
593 ~~the term of appointment shall end 3 years following the date of~~
594 ~~appointment for members appointed in 2003, 2004, and 2005. A~~
595 ~~vacancy shall be filled by appointment for the remainder of the~~
596 ~~term, and each appointing authority retains the right to~~
597 ~~reappoint members whose terms of appointment have expired.~~

598 ~~(c) The council may meet at the call of its chair, at the~~
599 ~~request of the agency, or at the request of a majority of its~~
600 ~~membership, but the council must meet at least quarterly.~~

601 ~~(d) Members shall elect a chair and vice chair annually.~~

602 ~~(e) A majority of the members constitutes a quorum, and the~~
603 ~~affirmative vote of a majority of a quorum is necessary to take~~
604 ~~action.~~

605 ~~(f) The council shall maintain minutes of each meeting and~~
606 ~~shall make such minutes available to any person.~~

607 ~~(g) Members of the council shall serve without compensation~~
608 ~~but shall be entitled to receive reimbursement for per diem and~~
609 ~~travel expenses as provided in s. 112.061.~~

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610 ~~(h) The council's duties and responsibilities include, but~~
611 ~~are not limited to, the following:~~

612 ~~1. To develop a mission statement, goals, and a plan of~~
613 ~~action for the identification, collection, standardization,~~
614 ~~sharing, and coordination of health-related data across federal,~~
615 ~~state, and local government and private sector entities.~~

616 ~~2. To develop a review process to ensure cooperative~~
617 ~~planning among agencies that collect or maintain health-related~~
618 ~~data.~~

619 ~~3. To create ad hoc issue-oriented technical workgroups on~~
620 ~~an as-needed basis to make recommendations to the council.~~

621 ~~(9) APPLICATION TO OTHER AGENCIES. Nothing in this section~~
622 ~~shall limit, restrict, affect, or control the collection,~~
623 ~~analysis, release, or publication of data by any state agency~~
624 ~~pursuant to its statutory authority, duties, or~~
625 ~~responsibilities.~~

626 Section 6. The Office of Program Policy Analysis and
627 Government Accountability (OPPAGA) shall monitor the Agency for
628 Health Care Administration's implementation of s. 408.05,
629 Florida Statutes, as amended by this act. No later than 1 year
630 after the agency completes implementation, OPPAGA shall provide
631 a report to the President of the Senate and the Speaker of the
632 House of Representatives containing recommendations regarding
633 the application of data practices made pursuant to s. 408.05,
634 Florida Statutes, to other executive branch agencies.

635 Section 7. For the purpose of incorporating the amendment
636 made by this act to section 257.36, Florida Statutes, in a
637 reference thereto, subsection (8) of section 120.54, Florida
638 Statutes, is reenacted to read:

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639 120.54 Rulemaking.—

640 (8) RULEMAKING RECORD.—In all rulemaking proceedings the
641 agency shall compile a rulemaking record. The record shall
642 include, if applicable, copies of:

643 (a) All notices given for the proposed rule.

644 (b) Any statement of estimated regulatory costs for the
645 rule.

646 (c) A written summary of hearings on the proposed rule.

647 (d) The written comments and responses to written comments
648 as required by this section and s. 120.541.

649 (e) All notices and findings made under subsection (4).

650 (f) All materials filed by the agency with the committee
651 under subsection (3).

652 (g) All materials filed with the Department of State under
653 subsection (3).

654 (h) All written inquiries from standing committees of the
655 Legislature concerning the rule.

656

657 Each state agency shall retain the record of rulemaking as long
658 as the rule is in effect. When a rule is no longer in effect,
659 the record may be destroyed pursuant to the records-retention
660 schedule developed under s. 257.36(6).

661 Section 8. Subsection (3) of section 20.42, Florida
662 Statutes, is amended to read:

663 20.42 Agency for Health Care Administration.—

664 (3) The department is ~~shall be~~ the chief health policy and
665 planning entity for the state. The department is responsible for
666 health facility licensure, inspection, and regulatory
667 enforcement; investigation of consumer complaints related to

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668 health care facilities and managed care plans; the
669 implementation of the certificate of need program; ~~the operation~~
670 ~~of the Florida Center for Health Information and Policy~~
671 ~~Analysis~~; the administration of the Medicaid program; the
672 administration of the contracts with the Florida Healthy Kids
673 Corporation; the certification of health maintenance
674 organizations and prepaid health clinics as set forth in part
675 III of chapter 641; and any other duties prescribed by statute
676 or agreement.

677 Section 9. Paragraph (c) of subsection (4) of section
678 381.026, Florida Statutes, is amended to read:

679 381.026 Florida Patient's Bill of Rights and
680 Responsibilities.—

681 (4) RIGHTS OF PATIENTS.—Each health care facility or
682 provider shall observe the following standards:

683 (c) *Financial information and disclosure.*—

684 1. A patient has the right to be given, upon request, by
685 the responsible provider, his or her designee, or a
686 representative of the health care facility full information and
687 necessary counseling on the availability of known financial
688 resources for the patient's health care.

689 2. A health care provider or a health care facility shall,
690 upon request, disclose to each patient who is eligible for
691 Medicare, before treatment, whether the health care provider or
692 the health care facility in which the patient is receiving
693 medical services accepts assignment under Medicare reimbursement
694 as payment in full for medical services and treatment rendered
695 in the health care provider's office or health care facility.

696 3. A primary care provider may publish a schedule of

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697 charges for the medical services that the provider offers to
698 patients. The schedule must include the prices charged to an
699 uninsured person paying for such services by cash, check, credit
700 card, or debit card. The schedule must be posted in a
701 conspicuous place in the reception area of the provider's office
702 and must include, but is not limited to, the 50 services most
703 frequently provided by the primary care provider. The schedule
704 may group services by three price levels, listing services in
705 each price level. The posting must be at least 15 square feet in
706 size. A primary care provider who publishes and maintains a
707 schedule of charges for medical services is exempt from the
708 license fee requirements for a single period of renewal of a
709 professional license under chapter 456 for that licensure term
710 and is exempt from the continuing education requirements of
711 chapter 456 and the rules implementing those requirements for a
712 single 2-year period.

713 4. If a primary care provider publishes a schedule of
714 charges pursuant to subparagraph 3., he or she shall ~~must~~
715 continually post it at all times for the duration of active
716 licensure in this state when primary care services are provided
717 to patients. If a primary care provider fails to post the
718 schedule of charges in accordance with this subparagraph, the
719 provider shall ~~be required to~~ pay any license fee and comply
720 with ~~any~~ continuing education requirements for which an
721 exemption was received.

722 5. A health care provider or a health care facility shall,
723 upon request, furnish a person, before the provision of medical
724 services, a reasonable estimate of charges for such services.
725 The health care provider or the health care facility shall

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726 provide an uninsured person, before the provision of a planned
727 nonemergency medical service, a reasonable estimate of charges
728 for such service and information regarding the provider's or
729 facility's discount or charity policies for which the uninsured
730 person may be eligible. Such estimates by a primary care
731 provider must be consistent with the schedule posted under
732 subparagraph 3. To the extent possible, estimates shall, ~~to the~~
733 ~~extent possible,~~ be written in language comprehensible to an
734 ordinary layperson. Such reasonable estimate does not preclude
735 the health care provider or health care facility from exceeding
736 the estimate or making additional charges based on changes in
737 the patient's condition or treatment needs.

738 6. Each licensed facility not operated by the state shall
739 make available to the public on its ~~Internet~~ website or by other
740 electronic means a description of and a link to the performance
741 outcome and financial data that is published by the agency
742 ~~pursuant to s. 408.05(3)(k).~~ The facility shall place in its
743 reception area a notice stating that the ~~in the reception area~~
744 ~~that such~~ information is available electronically and providing
745 the facility's website address. The licensed facility may
746 indicate that the pricing information is based on a compilation
747 of charges for the average patient and that each patient's bill
748 may vary from the average depending upon the severity of illness
749 and individual resources consumed. The licensed facility may
750 also indicate that the price of service is negotiable for
751 eligible patients based upon the patient's ability to pay.

752 7. A patient has the right to receive a copy of an itemized
753 bill and upon request. ~~A patient has a right to be given an~~
754 explanation of charges upon request.

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755 Section 10. Subsection (11) of section 395.301, Florida
756 Statutes, is amended to read:

757 395.301 Itemized patient bill; form and content prescribed
758 by the agency.—

759 (11) Each licensed facility shall make available on its
760 ~~Internet~~ website a link to the performance outcome and financial
761 data that is published by the Agency for Health Care
762 Administration ~~pursuant to s. 408.05(3)(k)~~. The facility shall
763 place in its reception area a notice stating ~~in the reception~~
764 ~~area~~ that the information is available electronically and
765 providing the facility's ~~Internet~~ website address.

766 Section 11. Paragraph (e) of subsection (2) of section
767 395.602, Florida Statutes, is amended to read:

768 395.602 Rural hospitals.—

769 (2) DEFINITIONS.—As used in this part:

770 (e) "Rural hospital" means an acute care hospital licensed
771 under this chapter, having 100 or fewer licensed beds and an
772 emergency room, which is:

773 1. The sole provider within a county with a population
774 density of no greater than 100 persons per square mile;

775 2. An acute care hospital, in a county with a population
776 density of no greater than 100 persons per square mile, which is
777 at least 30 minutes of travel time, on normally traveled roads
778 under normal traffic conditions, from any other acute care
779 hospital within the same county;

780 3. A hospital supported by a tax district or subdistrict
781 whose boundaries encompass a population of 100 persons or fewer
782 per square mile;

783 4. A hospital in a constitutional charter county with a

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784 population of more than ~~over~~ 1 million persons that has imposed
785 a local option health service tax pursuant to law and in an area
786 that was directly impacted by a catastrophic event on August 24,
787 1992, for which the Governor of Florida declared a state of
788 emergency pursuant to chapter 125, and has 120 beds or less that
789 serves an agricultural community with an emergency room
790 utilization of no less than 20,000 visits and a Medicaid
791 inpatient utilization rate greater than 15 percent;

792 5. A hospital with a service area that has a population of
793 100 persons or fewer per square mile. As used in this
794 subparagraph, the term "service area" means the fewest number of
795 zip codes that account for 75 percent of the hospital's
796 discharges for the most recent 5-year period, based on
797 information available from the agency's hospital inpatient
798 discharge database ~~in the Florida Center for Health Information~~
799 ~~and Policy Analysis at the agency;~~ or

800 6. A hospital designated as a critical access hospital, as
801 defined in s. 408.07.

802
803 Population densities used in this paragraph must be based upon
804 the most recently completed United States census. A hospital
805 that received funds under s. 409.9116 for a quarter beginning no
806 later than July 1, 2002, is deemed to have been and shall
807 continue to be a rural hospital from that date through June 30,
808 2015, if the hospital continues to have 100 or fewer licensed
809 beds and an emergency room, or meets the criteria of
810 subparagraph 4. An acute care hospital that has not previously
811 been designated as a rural hospital and that meets the criteria
812 of this paragraph shall be granted such designation upon

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813 application, including supporting documentation, to the agency.
814 A hospital that was licensed as a rural hospital during the
815 2010-2011 or 2011-2012 fiscal year shall continue to be a rural
816 hospital from the date of designation through June 30, 2015, if
817 the hospital continues to have 100 or fewer licensed beds and an
818 emergency room.

819 Section 12. Section 395.6025, Florida Statutes, is amended
820 to read:

821 395.6025 Rural hospital replacement facilities.—
822 Notwithstanding ~~the provisions of~~ s. 408.036, a hospital defined
823 as a statutory rural hospital in accordance with s. 395.602, or
824 a not-for-profit operator of rural hospitals, is not required to
825 obtain a certificate of need for the construction of a new
826 hospital located in a county with a population of at least
827 15,000 but no more than 18,000 and a density of less than 30
828 persons per square mile, or a replacement facility, if provided
829 ~~that~~ the replacement, or new, facility is located within 10
830 miles of the site of the currently licensed rural hospital and
831 within the current primary service area. As used in this
832 section, the term "service area" means the fewest number of zip
833 codes that account for 75 percent of the hospital's discharges
834 for the most recent 5-year period, based on information
835 available from the Agency for Health Care Administration's
836 hospital inpatient discharge database ~~in the Florida Center for~~
837 ~~Health Information and Policy Analysis at the Agency for Health~~
838 ~~Care Administration.~~

839 Section 13. Subsection (43) of section 408.07, Florida
840 Statutes, is amended to read:

841 408.07 Definitions.—As used in this chapter, with the

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842 exception of ss. 408.031-408.045, the term:

843 (43) "Rural hospital" means an acute care hospital licensed
844 under chapter 395, having 100 or fewer licensed beds and an
845 emergency room, and which is:

846 (a) The sole provider within a county with a population
847 density of no greater than 100 persons per square mile;

848 (b) An acute care hospital, in a county with a population
849 density of no greater than 100 persons per square mile, which is
850 at least 30 minutes of travel time, on normally traveled roads
851 under normal traffic conditions, from another acute care
852 hospital within the same county;

853 (c) A hospital supported by a tax district or subdistrict
854 whose boundaries encompass a population of 100 persons or fewer
855 per square mile;

856 (d) A hospital with a service area that has a population of
857 100 persons or fewer per square mile. As used in this paragraph,
858 the term "service area" means the fewest number of zip codes
859 that account for 75 percent of the hospital's discharges for the
860 most recent 5-year period, based on information available from
861 the Agency for Health Care Administration's hospital inpatient
862 discharge database ~~in the Florida Center for Health Information
863 and Policy Analysis at the Agency for Health Care
864 Administration;~~ or

865 (e) A critical access hospital.

866

867 Population densities used in this subsection must be based upon
868 the most recently completed United States census. A hospital
869 that received funds under s. 409.9116 for a quarter beginning no
870 later than July 1, 2002, is deemed to have been and shall

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871 continue to be a rural hospital from that date through June 30,
 872 2015, if the hospital continues to have 100 or fewer licensed
 873 beds and an emergency room, or meets the criteria of s.
 874 395.602(2)(e)4. An acute care hospital that has not previously
 875 been designated as a rural hospital and that meets the criteria
 876 of this subsection shall be granted such designation upon
 877 application, including supporting documentation, to the Agency
 878 for Health Care Administration.

879 Section 14. Paragraph (a) of subsection (4) of section
 880 408.18, Florida Statutes, is amended to read:

881 408.18 Health Care Community Antitrust Guidance Act;
 882 antitrust no-action letter; market-information collection and
 883 education.—

884 (4)(a) Members of the health care community who seek
 885 antitrust guidance may request a review of their proposed
 886 business activity by the Attorney General's office. In
 887 conducting its review, the Attorney General's office may seek
 888 whatever documentation, data, or other material it deems
 889 necessary from the Agency for Health Care Administration, ~~the~~
 890 ~~Florida Center for Health Information and Policy Analysis,~~ and
 891 the Office of Insurance Regulation of the Financial Services
 892 Commission.

893 Section 15. Section 465.0244, Florida Statutes, is amended
 894 to read:

895 465.0244 Information disclosure.—Every pharmacy shall make
 896 available on its ~~Internet~~ website a link to the performance
 897 outcome and financial data that is published by the Agency for
 898 Health Care Administration ~~pursuant to s. 408.05(3)(k)~~ and shall
 899 place in the area where customers receive filled prescriptions

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900 notice that such information is available electronically and the
901 address of its ~~Internet~~ website.

902 Section 16. Subsection (2) of section 627.6499, Florida
903 Statutes, is amended to read:

904 627.6499 Reporting by insurers and third-party
905 administrators.—

906 (2) Each health insurance issuer shall make available on
907 its ~~Internet~~ website a link to the performance outcome and
908 financial data that is published by the Agency for Health Care
909 Administration ~~pursuant to s. 408.05(3)(k)~~ and shall include in
910 every policy delivered or issued for delivery to any person in
911 the state or any materials provided as required by s. 627.64725
912 notice that such information is available electronically and the
913 address of its ~~Internet~~ website.

914 Section 17. Subsection (7) of section 641.54, Florida
915 Statutes, is amended to read:

916 641.54 Information disclosure.—

917 (7) Each health maintenance organization shall make
918 available on its ~~Internet~~ website a link to the performance
919 outcome and financial data that is published by the Agency for
920 Health Care Administration ~~pursuant to s. 408.05(3)(k)~~ and shall
921 include in every policy delivered or issued for delivery to any
922 person in the state or ~~any~~ materials provided as required by s.
923 627.64725 notice that such information is available
924 electronically and the address of its ~~Internet~~ website.

925 Section 18. This act shall take effect July 1, 2014.