A bill to be entitled
An act relating to cardiac programs; amending s. 395.1055, F.S.; requiring the Agency for Health Care Administration to establish a technical advisory panel to develop procedures and standards for measuring outcomes of pediatric cardiac catheterization programs and pediatric open-heart surgery programs; establishing membership of the technical advisory panel; requiring the agency to develop and adopt rules for pediatric cardiac catheterization programs and pediatric open-heart surgery programs based on recommendations of the technical advisory panel; amending s. 408.0361, F.S.; establishing additional criteria that must be included by the Agency for Health Care Administration in rules relating to adult cardiovascular services at hospitals seeking licensure for a Level I program; providing an appropriation; providing an effective date.

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

Section 1. Present subsection (9) of section 395.1055, Florida Statutes, is redesignated as subsection (10), and a new subsection (9) is added to that section, to read:

395.1055 Rules and enforcement.—
(9) The agency shall establish a technical advisory panel to develop procedures and standards for measuring outcomes of pediatric cardiac catheterization programs and pediatric open-heart surgery programs.
(a) The panel shall include 1 at-large member who has expertise in pediatric and adult congenital heart disease, appointed by the Secretary of Health Care Administration, and 10 members, 1 appointed by each chief executive officer of the following hospitals, who must be pediatric cardiologists or pediatric cardiovascular surgeons:

1. Johns Hopkins All Children’s Hospital in St. Petersburg.
2. Arnold Palmer Hospital for Children in Orlando.
4. Nicklaus Children’s Hospital in Miami.
5. St. Joseph’s Children’s Hospital in Tampa.
6. University of Florida Health Shands Hospital in Gainesville.
7. University of Miami Holtz Children’s Hospital in Miami.
8. Wolfson Children’s Hospital in Jacksonville.
9. Florida Hospital for Children in Orlando.
10. Nemours Children’s Hospital in Orlando.

(b) Based on the recommendations of the panel, the agency shall develop and adopt rules for pediatric cardiac catheterization programs and pediatric open-heart surgery programs which include at least the following:

1. A risk adjustment procedure that accounts for the variations in severity and case mix found in hospitals in this state;
2. Outcome standards specifying expected levels of performance in pediatric cardiac programs. Such standards may include, but are not limited to, in-hospital mortality, infection rates, nonfatal myocardial infarctions, length of postoperative bleeds, and returns to surgery; and
3. Specific steps to be taken by the agency and licensed facilities that do not meet the outcome standards within a specified time, including time required for detailed case reviews and development and implementation of corrective action plans.

Section 2. Paragraph (b) of subsection (3) of section 408.0361, Florida Statutes, is amended to read:

408.0361 Cardiovascular services and burn unit licensure.—

(3) In establishing rules for adult cardiovascular services, the agency shall include provisions that allow for:

(b) For a hospital seeking a Level I program, demonstration that, for the most recent 12-month period as reported to the agency, it has provided a minimum of 300 adult inpatient and outpatient diagnostic cardiac catheterizations or, for the most recent 12-month period, has discharged or transferred at least 300 inpatients with the principal diagnosis of ischemic heart disease and that it has a formalized, written transfer agreement with a hospital that has a Level II program, including written transport protocols to ensure safe and efficient transfer of a patient within 60 minutes. However, a hospital located more than 100 road miles from the closest Level II adult cardiovascular services program does not need to meet the 60-minute transfer time protocol if the hospital demonstrates that it has a formalized, written transfer agreement with a hospital that has a Level II program. The agreement must include written transport protocols to ensure the safe and efficient transfer of a patient, taking into consideration the patient’s clinical and physical characteristics, road and weather conditions, and viability of ground and air ambulance service to transfer the
patient. At a minimum, the rules for adult cardiovascular services must require nursing and technical staff to have demonstrated experience in handling acutely ill patients requiring percutaneous cardiac intervention in dedicated cardiac interventional laboratories or surgical centers. If a staff member’s previous experience was in a dedicated cardiac interventional laboratory at a hospital that did not have an approved adult open-heart-surgery program, the staff member’s previous experience does not qualify unless, at the time the staff member acquired his or her experience, the dedicated cardiac interventional laboratory:

1. Had an annual volume of 500 or more percutaneous cardiac intervention procedures;
2. Achieved a demonstrated success rate of 95 percent or greater for percutaneous cardiac intervention procedures;
3. Experienced a complication rate of less than 5 percent for percutaneous cardiac intervention procedures; and
4. Performed diverse cardiac procedures, including, but not limited to, balloon angioplasty and stenting, rotational atherectomy, cutting balloon atheroma remodeling, and procedures relating to left ventricular support capability.

Section 3. For the 2017-2018 fiscal year, the sum of $95,620 is appropriated from the Health Care Trust Fund to the Agency for Health Care Administration for the purpose of implementing s. 395.1055(9), Florida Statutes.

Section 4. This act shall take effect July 1, 2017.