Bill No. CS/HB 597 (2018)

Amendment No. 1

	COMMITTEE/SUBCOMMITTEE ACTION
	ADOPTED (Y/N)
	ADOPTED AS AMENDED (Y/N)
	ADOPTED W/O OBJECTION (Y/N)
	FAILED TO ADOPT (Y/N)
	WITHDRAWN (Y/N)
	OTHER
1	Committee/Subcommittee hearing bill: Health & Human Services
2	Committee
3	Representative Yarborough offered the following:
4	
5	Amendment (with title amendment)
6	Remove lines 885-919 and insert:
7	Section 31. Subsections (2), (3), (9), and (10) of section
8	395.1055, Florida Statutes, are amended, and paragraph (i) is
9	added to subsection (1), to read:
10	395.1055 Rules and enforcement
11	(1) The agency shall adopt rules pursuant to ss.
12	120.536(1) and 120.54 to implement the provisions of this part,
13	which shall include reasonable and fair minimum standards for
14	ensuring that:
15	(i) All hospitals providing organ transplantation,
16	neonatal intensive care services, inpatient psychiatric
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17 <u>services, inpatient substance abuse services, or comprehensive</u> 18 <u>medical rehabilitation meet the minimum licensure requirements</u> 19 <u>adopted by the agency. Such licensure requirements must include</u> 20 <u>quality of care, nurse staffing, physician staffing, physical</u> 21 <u>plant, equipment, emergency transportation, and data reporting</u> 22 <u>standards.</u>

(2) Separate standards may be provided for general and
specialty hospitals, ambulatory surgical centers, mobile
surgical facilities, and statutory rural hospitals as defined in
s. 395.602.

The agency shall adopt rules with respect to the care 27 (3) 28 and treatment of patients residing in distinct part nursing 29 units of hospitals which are certified for participation in Title XVIII (Medicare) and Title XIX (Medicaid) of the Social 30 31 Security Act skilled nursing facility program. Such rules shall 32 take into account the types of patients treated in hospital 33 skilled nursing units, including typical patient acuity levels and the average length of stay in such units, and shall be 34 35 limited to the appropriate portions of the Omnibus Budget 36 Reconciliation Act of 1987 (Pub. L. No. 100-203) (December 22, 37 1987), Title IV (Medicare, Medicaid, and Other Health-Related Programs), Subtitle C (Nursing Home Reform), as amended. The 38 agency shall require level 2 background screening as specified 39 in s. 408.809(1)(e) pursuant to s. 408.809 and chapter 435 for 40 41 personnel of distinct part nursing units.

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42 The agency shall establish a technical advisory panel, (9) 43 pursuant to s. 20.052, to develop procedures and standards for 44 measuring outcomes of pediatric cardiac catheterization programs 45 and pediatric cardiovascular open-heart surgery programs. 46 (a) Members of the panel must have technical expertise in 47 pediatric cardiac medicine and shall serve without compensation 48 and shall not be reimbursed for per diem and travel expenses. 49 Voting members of the panel shall include: (a) The (b) 50 panel must be composed of 3 at-large members, including 1 51 cardiologist who is board certified in caring for adults with 52 congenital heart disease and 2 board-certified pediatric 53 cardiologists, neither of whom may be employed by any of the 54 hospitals specified in subparagraphs 1.-10. or their affiliates, 55 each of whom is appointed by the Secretary of Health Care 56 Administration, and 10 members, and an alternate for each 57 member, each of whom is a pediatric cardiologist or a pediatric 58 cardiovascular surgeon, each appointed by the chief executive 59 officer of one of the following hospitals: 60 1. Johns Hopkins All Children's Hospital in St. 61 Petersburg. 62 2. Arnold Palmer Hospital for Children in Orlando. 63 3. Joe DiMaggio Children's Hospital in Hollywood. 4. Nicklaus Children's Hospital in Miami. 64 5. St. Joseph's Children's Hospital in Tampa. 65 654265 - h0597-line885.docx Published On: 1/31/2018 7:28:49 PM

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66	6. University of Florida Health Shands Hospital in
67	Gainesville.
68	7. University of Miami Holtz Children's Hospital in Miami.
69	8. Wolfson Children's Hospital in Jacksonville.
70	9. Florida Hospital for Children in Orlando.
71	10. Nemours Children's Hospital in Orlando.
72	
73	Appointments made under subparagraphs 110. are contingent upon
74	the hospital's maintenance of pediatric certificates of need and
75	the hospital's compliance with this section and rules adopted
76	thereunder, as determined by the Secretary of Health Care
77	Administration. A member appointed under subparagraphs 110.
78	whose hospital fails to maintain such certificates or comply
79	with standards may serve only as a nonvoting member until the
80	hospital restores such certificates or complies with such
81	standards.
82	
83	(c) The Secretary of Health Care Administration may
84	appoint nonvoting members to the panel. Nonvoting members may
85	include:
86	1. The Secretary of Health Care Administration.
87	2. The Surgeon General.
88	3. The Deputy Secretary of Children's Medical Services.
89	4. Any current or past Division Director of Children's
90	Medical Services.
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91 5. A parent of a child with congenital heart disease. 92 6. An adult with congenital heart disease. 93 7. A representative from each of the following organizations: the Florida Chapter of the American Academy of 94 95 Pediatrics, the Florida Chapter of the American College of 96 Cardiology, the Greater Southeast Affiliate of the American Heart Association, the Adult Congenital Heart Association, the 97 March of Dimes, the Florida Association of Children's Hospitals, 98 99 and the Florida Society of Thoracic and Cardiovascular Surgeons. 100 (d) The panel shall meet biannually, or more frequently 101 upon the call of the Secretary of Health Care Administration. 102 Such meetings may be conducted telephonically, or by other 103 electronic means. 104 (e) The duties of the panel include recommending to the 105 agency standards for quality of care, personnel, physical plant, 106 equipment, emergency transportation, and data reporting for 107 hospitals that provide pediatric cardiac services. 108 (f) Beginning in January 1, 2020, and annually thereafter, 109 the panel shall submit a report to the Governor, the President 110 of the Senate, the Speaker of the House of Representatives, the Secretary of Health Care Administration, and the State Surgeon 111 112 General. The report must summarize the panel's activities during the preceding fiscal year and include data and performance 113 114 measures on surgical morbidity and mortality for all pediatric 115 cardiac programs. 654265 - h0597-line885.docx Published On: 1/31/2018 7:28:49 PM

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116	(b) Based on the recommendations of the panel, the agency
117	shall develop and adopt rules for pediatric cardiac
118	catheterization programs and pediatric open-heart surgery
119	programs which include at least the following:
120	1. A risk adjustment procedure that accounts for the
121	variations in severity and case mix found in hospitals in this
122	state;
123	2. Outcome standards specifying expected levels of
124	performance in pediatric cardiac programs. Such standards may
125	include, but are not limited to, in-hospital mortality,
126	infection rates, nonfatal myocardial infarctions, length of
127	postoperative bleeds, and returns to surgery; and
128	
129	facilities that do not meet the outcome standards within a
130	specified time, including time required for detailed case
131	reviews and development and implementation of corrective action
132	plans.
133	(c) This subsection is repealed on July 1, 2022.
134	(10) Based on the recommendations of the advisory panel in
135	subsection (9), the agency shall adopt rules for pediatric
136	cardiac programs that, at a minimum, include:
137	(a) Standards for pediatric cardiac catheterization
138	services and pediatric cardiovascular surgery including quality
139	of care, personnel, physical plant, equipment, emergency

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140	transportation, data reporting, and appropriate operating hours
141	and timeframes for mobilization for emergency procedures.
142	(b) Outcome standards consistent with nationally
143	established levels of performance in pediatric cardiac programs.
144	(c) Specific steps to be taken by the agency and licensed
145	facilities when the facilities do not meet the outcome standards
146	within a specified time, including time required for detailed
147	case reviews and development and implementation of corrective
148	action plans.
149	(11) A pediatric cardiac program shall:
150	(a) Be located in a hospital licensed under this chapter
151	and include the following co-located components: a pediatric
152	cardiology clinic, a pediatric cardiac catheterization
153	laboratory, and a pediatric cardiovascular surgery program.
154	(b) Have a risk adjustment surgical procedure protocol
155	following the guidelines established by the Society of Thoracic
156	Surgeons.
157	(c) Have quality assurance and quality improvement
158	processes in place to enhance clinical operation and patient
159	satisfaction with services.
160	(d) Participate in the clinical outcome reporting systems
161	operated by the Society of Thoracic Surgeons and the American
162	College of Cardiology.
163	(12) (10) The agency may adopt rules to administer the
164	requirements of part II of chapter 408.
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165	Section 32. Paragraphs (k) is added to subsection (3) of
166	section 408.05, Florida Statutes, to read:
167	408.05 Florida Center for Health Information and
168	Transparency
169	(3) HEALTH INFORMATION TRANSPARENCYIn order to
170	disseminate and facilitate the availability of comparable and
171	uniform health information, the agency shall perform the
172	following functions:
173	(k) Contract with the Society of Thoracic Surgeons and the
174	American College of Cardiology to obtain data reported pursuant
175	to s. 395.1055 for publication on the agency's website in a
176	manner that will allow consumers to be informed of aggregate
177	data and to compare pediatric cardiac programs.
178	
178 179	
	TITLE AMENDMENT
179	TITLE AMENDMENT Remove line 43 and insert:
179 180	
179 180 181	Remove line 43 and insert:
179 180 181 182	Remove line 43 and insert: nursing units; requiring the Agency for Health Care
179 180 181 182 183	Remove line 43 and insert: nursing units; requiring the Agency for Health Care Administration to adopt rules establishing standards for
179 180 181 182 183 184	Remove line 43 and insert: nursing units; requiring the Agency for Health Care Administration to adopt rules establishing standards for pediatric cardiac catheterization and pediatric cardiovascular
179 180 181 182 183 184 185	Remove line 43 and insert: nursing units; requiring the Agency for Health Care Administration to adopt rules establishing standards for pediatric cardiac catheterization and pediatric cardiovascular surgery programs located in licensed hospitals; providing
179 180 181 182 183 184 185 186	Remove line 43 and insert: nursing units; requiring the Agency for Health Care Administration to adopt rules establishing standards for pediatric cardiac catheterization and pediatric cardiovascular surgery programs located in licensed hospitals; providing requirements for such programs; establishing minimum standards
179 180 181 182 183 184 185 186 187	Remove line 43 and insert: nursing units; requiring the Agency for Health Care Administration to adopt rules establishing standards for pediatric cardiac catheterization and pediatric cardiovascular surgery programs located in licensed hospitals; providing requirements for such programs; establishing minimum standards for rules for such pediatric cardiac programs; requiring
179 180 181 182 183 184 185 186 187 188 189	Remove line 43 and insert: nursing units; requiring the Agency for Health Care Administration to adopt rules establishing standards for pediatric cardiac catheterization and pediatric cardiovascular surgery programs located in licensed hospitals; providing requirements for such programs; establishing minimum standards for rules for such pediatric cardiac programs; requiring hospitals with pediatric cardiac programs to participate in the
179 180 181 182 183 184 185 186 187 188 189	Remove line 43 and insert: nursing units; requiring the Agency for Health Care Administration to adopt rules establishing standards for pediatric cardiac catheterization and pediatric cardiovascular surgery programs located in licensed hospitals; providing requirements for such programs; establishing minimum standards for rules for such pediatric cardiac programs; requiring hospitals with pediatric cardiac programs to participate in the clinical outcome reporting systems; revising duties and

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190 membership of the pediatric cardiac technical advisory panel; 191 amending s. 408.05, F.S.; requiring the agency to contract with 192 the Society of Thoracic Surgeons and the American College of 193 Cardiology for collection of certain data for publication on the 194 agency's website for certain purposes; repealing ss. 395.10971 195 and 395.10972,

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