By Senator Harrell

	25-01997-19 20191712
1	A bill to be entitled
2	An act relating to hospital licensure; amending s.
3	395.003, F.S.; deleting an obsolete provision;
4	requiring hospitals licensed after a specified date to
5	participate in the Medicaid program as a provider of
6	medical assistance and provide a certain amount of
7	charity care; providing a separate calculation of
8	required charity care for such hospitals located in a
9	medically underserved area; authorizing such hospitals
10	to provide a certain donation the Agency for Health
11	Care Administration's Grants and Donations Trust Fund
12	in lieu of providing the required charity care;
13	requiring such hospitals to annually report compliance
14	to the agency; requiring the agency to impose a
15	specified administrative fine for noncompliance;
16	conforming cross-references; amending s. 395.0191,
17	F.S.; deleting a provision relating to certificates of
18	need for hospitals; amending s. 395.1055, F.S.;
19	deleting a provision requiring hospitals to submit
20	data to the agency in the certificate-of-need review
21	process; repealing s. 395.6025, F.S., relating to
22	rural hospital replacement facilities; amending s.
23	408.032, F.S.; revising the definition of the term
24	"health care facility" to exclude hospitals and long-
25	term care hospitals for purposes of the Health
26	Facility and Services Development Act; deleting the
27	definitions of the terms "hospital" and "long-term
28	care hospital"; amending s. 408.034; conforming a
29	provision to changes made by the act; amending ss.

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30	408.035 and 408.036, F.S.; deleting provisions related
31	to the agency's consideration and review of
32	certificates of need for general hospitals, specialty
33	hospitals, and long-term care hospitals; amending ss.
34	408.037, and 408.039, F.S.; deleting provisions
35	relating to certificate of need applications for
36	general hospitals; amending s. 408.040, F.S.;
37	requiring the agency to assess a specified
38	administrative fine against the holder of a
39	certificate of need or the holder of an exemption that
40	fails to comply with specified conditions; amending s.
41	408.043, F.S.; deleting provisions relating to
42	certificates of need for osteopathic acute care
43	hospitals; amending s. 395.1065, F.S.; conforming a
44	cross-reference; providing an effective date.
45	
46	Be It Enacted by the Legislature of the State of Florida:
47	
48	Section 1. Present subsections (8), (9), and (10) of
49	section 395.003, Florida Statutes, are redesignated as
50	subsections (9), (10), and (11), respectively, paragraph (c) of
51	subsection (1) and present subsections (9) and (10) of that
52	section are amended, and a new subsection (8) is added to that
53	section, to read:
54	395.003 Licensure; denial, suspension, and revocation
55	(1)
56	(c) Until July 1, 2006, additional emergency departments
57	located off the premises of licensed hospitals may not be
58	authorized by the agency.

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59	(8) Applicable only to a hospital licensed on or after July
60	<u>1, 2019:</u>
61	(a) Each such hospital must participate in the Medicaid
62	program as a provider of medical assistance.
63	(b) Except as provided in paragraph (c), each such hospital
64	must provide charity care in an amount equal to or greater than
65	the applicable district average among licensed providers of
66	similar services. For purposes of this subsection, the term
67	"charity care" means uncompensated care delivered to uninsured
68	patients having incomes at or below 200 percent of the federal
69	poverty level when such services are preauthorized by the
70	licensee and not subject to collection procedures, and
71	"district" has the same meaning as in s. 408.032(5). The
72	valuation of charity care must be based on Medicaid
73	reimbursement rates.
74	(c) If such a hospital is located in a medically
75	underserved area, the amount of charity care required to be
76	provided by the hospital under paragraph (b) is equivalent in
77	percentage to the medically underserved area's Index of Medical
78	Underservice score as calculated by the federal Health Resources
79	and Services Administration within the Department of Health and
80	Human Services.
81	(d) In lieu of providing charity care under paragraph (b)
82	or paragraph (c), each such hospital may donate an amount
83	determined by the agency to be functionally equivalent to the
84	amounts required under those paragraphs to the agency's Grants
85	and Donations Trust Fund.
86	(e) Each such hospital shall annually report to the agency
87	its compliance with this subsection. Failure to report

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25-01997-19 20191712 88 compliance constitutes noncompliance. The agency shall assess an 89 administrative fine on a hospital that fails to comply with this subsection in the amount of 1 percent of its net revenue for 90 91 each 0.5 percent of the required amount of charity care that was 92 not provided pursuant to paragraph (b) or paragraph (c) or the 93 required amount as determined by the agency pursuant to 94 paragraph (d). 95 (10) (9) A hospital licensed as of June 1, 2004, is shall be

96 exempt from subsection (9) (8) as long as the hospital maintains 97 the same ownership, facility street address, and range of 98 services that were in existence on June 1, 2004. Any transfer of 99 beds, or other agreements that result in the establishment of a 100 hospital or hospital services within the intent of this section, shall be subject to subsection (9) (8). Unless the hospital is 101 otherwise exempt under subsection (9) (8), the agency shall deny 102 103 or revoke the license of a hospital that violates any of the 104 criteria set forth in that subsection.

105 (11) (10) The agency may adopt rules implementing the 106 licensure requirements set forth in subsection (9) (8). Within 14 107 days after rendering its decision on a license application or revocation, the agency shall publish its proposed decision in 108 109 the Florida Administrative Register. Within 21 days after 110 publication of the agency's decision, any authorized person may 111 file a request for an administrative hearing. In administrative proceedings challenging the approval, denial, or revocation of a 112 113 license pursuant to subsection (9) (8), the hearing must be based on the facts and law existing at the time of the agency's 114 proposed agency action. Existing hospitals may initiate or 115 116 intervene in an administrative hearing to approve, deny, or

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117	revoke licensure under subsection <u>(9)</u> based upon a showing
118	that an established program will be substantially affected by
119	the issuance or renewal of a license to a hospital within the
120	same district or service area.
121	Section 2. Subsection (10) of section 395.0191, Florida
122	Statutes, is amended to read:
123	395.0191 Staff membership and clinical privileges
124	(10) Nothing herein shall be construed by the agency as
125	requiring an applicant for a certificate of need to establish
126	proof of discrimination in the granting of or denial of hospital
127	staff membership or clinical privileges as a precondition to
128	obtaining such certificate of need under the provisions of s.
129	408.043.
130	Section 3. Paragraph (f) of subsection (1) of section
131	395.1055, Florida Statutes, is amended to read:
132	395.1055 Rules and enforcement
133	(1) The agency shall adopt rules pursuant to ss. 120.536(1)
134	and 120.54 to implement the provisions of this part, which shall
135	include reasonable and fair minimum standards for ensuring that:
136	(f) All hospitals submit such data as necessary to conduct
137	certificate-of-need reviews required under part I of chapter
138	408. Such data shall include, but shall not be limited to,
139	patient origin data, hospital utilization data, type of service
140	reporting, and facility staffing data. The agency may not
141	collect data that identifies or could disclose the identity of
142	individual patients. The agency shall utilize existing uniform
143	statewide data sources when available and shall minimize
144	reporting costs to hospitals.
145	Section 4. Section 395.6025, Florida Statutes, is repealed.
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146	Section 5. Subsections (8), (11), and (13) of section
147	408.032, Florida Statutes, are amended to read:
148	408.032 Definitions relating to Health Facility and
149	Services Development ActAs used in ss. 408.031-408.045, the
150	term:
151	(8) "Health care facility" means a hospital, long-term care
152	hospital, skilled nursing facility, hospice, or intermediate
153	care facility for the developmentally disabled. A facility
154	relying solely on spiritual means through prayer for healing is
155	not included as a health care facility.
156	(11) "Hospital" means a health care facility licensed under
157	chapter 395.
158	(13) "Long-term care hospital" means a hospital licensed
159	under chapter 395 which meets the requirements of 42 C.F.R. s.
160	412.23(e) and seeks exclusion from the acute care Medicare
161	prospective payment system for inpatient hospital services.
162	Section 6. Subsection (2) of section 408.034, Florida
163	Statutes, is amended to read:
164	408.034 Duties and responsibilities of agency; rules
165	(2) In the exercise of its authority to issue licenses to
166	health care facilities and health service providers, as provided
167	under <u>chapter</u> chapters 393 and 395 and parts II, IV, and VIII of
168	chapter 400, the agency may not issue a license to any health
169	care facility or health service provider that fails to receive a
170	certificate of need or an exemption for the licensed facility or
171	service.
172	Section 7. Section 408.035, Florida Statutes, is amended to
173	read:
174	408.035 Review criteria

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175	(1) The agency shall determine the reviewability of
176	applications and shall review applications for certificate-of-
177	need determinations for health care facilities and health
178	services in context with the following criteria, except for
179	general hospitals as defined in s. 395.002:
180	(1) (a) The need for the health care facilities and health
181	services being proposed.
182	(2) (b) The availability, quality of care, accessibility,
183	and extent of utilization of existing health care facilities and
184	health services in the service district of the applicant.
185	(3)(c) The ability of the applicant to provide quality of
186	care and the applicant's record of providing quality of care.
187	(4)(d) The availability of resources, including health
188	personnel, management personnel, and funds for capital and
189	operating expenditures, for project accomplishment and
190	operation.
191	(5)(e) The extent to which the proposed services will
192	enhance access to health care for residents of the service
193	district.
194	<u>(6)(f) The immediate and long-term financial feasibility of</u>
195	the proposal.
196	<u>(7)</u> The extent to which the proposal will foster
197	competition that promotes quality and cost-effectiveness.
198	<u>(8)-(h)</u> The costs and methods of the proposed construction,
199	including the costs and methods of energy provision and the
200	availability of alternative, less costly, or more effective
201	methods of construction.
202	(9) (i) The applicant's past and proposed provision of
203	health care services to Medicaid patients and the medically

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204	indigent.
205	<u>(10)</u> The applicant's designation as a Gold Seal Program
206	nursing facility pursuant to s. 400.235, when the applicant is
207	requesting additional nursing home beds at that facility.
208	(2) For a general hospital, the agency shall consider only
209	the criteria specified in paragraph (1)(a), paragraph (1)(b),
210	except for quality of care in paragraph (1)(b), and paragraphs
211	(1)(e), (g), and (i).
212	Section 8. Paragraph (c) of subsection (1) and paragraph
213	(a) of subsection (2) of section 408.036, Florida Statutes, are
214	amended to read:
215	408.036 Projects subject to review; exemptions
216	(1) APPLICABILITYUnless exempt under subsection (3), all
217	health-care-related projects, as described in paragraphs (a)-
218	(f), are subject to review and must file an application for a
219	certificate of need with the agency. The agency is exclusively
220	responsible for determining whether a health-care-related
221	project is subject to review under ss. 408.031-408.045.
222	(c) The conversion from one type of health care facility to
223	another, including the conversion from a general hospital, a
224	specialty hospital, or a long-term care hospital.
225	(2) PROJECTS SUBJECT TO EXPEDITED REVIEWUnless exempt
226	pursuant to subsection (3), the following projects are subject
227	to expedited review:
228	(a) Transfer of a certificate of need , except that when an
229	existing hospital is acquired by a purchaser, all certificates
230	of need issued to the hospital which are not yet operational
231	shall be acquired by the purchaser without need for a transfer.
232	

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233	The agency shall develop rules to implement the expedited review
234	process, including time schedule, application content that may
235	be reduced from the full requirements of s. 408.037(1), and
236	application processing.
237	Section 9. Section 408.037, Florida Statutes, is amended to
238	read:
239	408.037 Application content
240	(1) Except as provided in subsection (2) for a general
241	hospital, An application for a certificate of need must contain:
242	(a) A detailed description of the proposed project and
243	statement of its purpose and need in relation to the district
244	health plan.
245	(b) A statement of the financial resources needed by and
246	available to the applicant to accomplish the proposed project.
247	This statement must include:
248	1. A complete listing of all capital projects, including
249	new health facility development projects and health facility
250	acquisitions applied for, pending, approved, or underway in any
251	state at the time of application, regardless of whether or not
252	that state has a certificate-of-need program or a capital
253	expenditure review program pursuant to s. 1122 of the Social
254	Security Act. The agency may, by rule, require less-detailed
255	information from major health care providers. This listing must
256	include the applicant's actual or proposed financial commitment
257	to those projects and an assessment of their impact on the
258	applicant's ability to provide the proposed project.
259	2. A detailed listing of the needed capital expenditures,

260 including sources of funds.

261

3. A detailed financial projection, including a statement

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262	of the projected revenue and expenses for the first 2 years of
263	operation after completion of the proposed project. This
264	statement must include a detailed evaluation of the impact of
265	the proposed project on the cost of other services provided by
266	the applicant.
267	(c) An audited financial statement of the applicant or the
268	applicant's parent corporation if audited financial statements
269	of the applicant do not exist. In an application submitted by an
270	existing health care facility, health maintenance organization,
271	or hospice, financial condition documentation must include, but
272	need not be limited to, a balance sheet and a profit-and-loss
273	statement of the 2 previous fiscal years' operation.
274	(2) An application for a certificate of need for a general
275	hospital must contain a detailed description of the proposed
276	general hospital project and a statement of its purpose and the
277	needs it will meet. The proposed project's location, as well as
278	its primary and secondary service areas, must be identified by
279	zip code. Primary service area is defined as the zip codes from
280	which the applicant projects that it will draw 75 percent of its
281	discharges. Secondary service area is defined as the zip codes
282	from which the applicant projects that it will draw its
283	remaining discharges. If, subsequent to issuance of a final
284	order approving the certificate of need, the proposed location
285	of the general hospital changes or the primary service area
286	materially changes, the agency shall revoke the certificate of
287	need. However, if the agency determines that such changes are
288	deemed to enhance access to hospital services in the service
289	district, the agency may permit such changes to occur. A party
290	participating in the administrative hearing regarding the

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25-01997-19 20191712 291 issuance of the certificate of need for a general hospital has 292 standing to participate in any subsequent proceeding regarding 293 the revocation of the certificate of need for a hospital for 294 which the location has changed or for which the primary service 295 area has materially changed. In addition, the application for 296 the certificate of need for a general hospital must include a 297 statement of intent that, if approved by final order of the 298 agency, the applicant shall within 120 days after issuance of 299 the final order or, if there is an appeal of the final order, 300 within 120 days after the issuance of the court's mandate on 301 appeal, furnish satisfactory proof of the applicant's financial 302 ability to operate. The agency shall establish documentation requirements, to be completed by each applicant, which show 303 304 anticipated provider revenues and expenditures, the basis for 305 financing the anticipated cash-flow requirements of the 306 provider, and an applicant's access to contingency financing. A 307 party participating in the administrative hearing regarding the issuance of the certificate of need for a general hospital may 308 309 provide written comments concerning the adequacy of the 310 financial information provided, but such party does not have 311 standing to participate in an administrative proceeding 312 regarding proof of the applicant's financial ability to operate. 313 The agency may require a licensee to provide proof of financial ability to operate at any time if there is evidence of financial 314 315 instability, including, but not limited to, unpaid expenses 316 necessary for the basic operations of the provider. 317 (2) (3) The applicant must certify that it will license and

318 operate the health care facility. For an existing health care 319 facility, the applicant must be the licenseholder of the

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320	facility.
321	Section 10. Paragraphs (c) and (d) of subsection (3),
322	paragraphs (b) and (c) of subsection (5), and paragraph (d) of
323	subsection (6) of section 408.039, Florida Statutes, are amended
324	to read:
325	408.039 Review process.—The review process for certificates
326	of need shall be as follows:
327	(3) APPLICATION PROCESSING
328	(c) Except for competing applicants, in order to be
329	eligible to challenge the agency decision on a general hospital
330	application under review pursuant to paragraph (5)(c), existing
331	hospitals must submit a detailed written statement of opposition
332	to the agency and to the applicant. The detailed written
333	statement must be received by the agency and the applicant
334	within 21 days after the general hospital application is deemed
335	complete and made available to the public.
336	(d) In those cases where a written statement of opposition
337	has been timely filed regarding a certificate of need
338	application for a general hospital, the applicant for the
339	general hospital may submit a written response to the agency.
340	Such response must be received by the agency within 10 days of
341	the written statement due date.
342	(5) ADMINISTRATIVE HEARINGS
343	(b) Hearings shall be held in Tallahassee unless the
344	administrative law judge determines that changing the location
345	will facilitate the proceedings. The agency shall assign
346	proceedings requiring hearings to the Division of Administrative
347	Hearings of the Department of Management Services within 10 days
348	after the time has expired for requesting a hearing. Except upon

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349	unanimous consent of the parties or upon the granting by the
350	administrative law judge of a motion of continuance, hearings
351	shall commence within 60 days after the administrative law judge
352	has been assigned. For an application for a general hospital,
353	administrative hearings shall commence within 6 months after the
354	administrative law judge has been assigned, and a continuance
355	may not be granted absent a finding of extraordinary
356	circumstances by the administrative law judge. All parties,
357	except the agency, shall bear their own expense of preparing a
358	transcript. In any application for a certificate of need which
359	is referred to the Division of Administrative Hearings for
360	hearing, the administrative law judge shall complete and submit
361	to the parties a recommended order as provided in ss. 120.569
362	and 120.57. The recommended order shall be issued within 30 days
363	after the receipt of the proposed recommended orders or the
364	deadline for submission of such proposed recommended orders,
365	whichever is earlier. The division shall adopt procedures for
366	administrative hearings which shall maximize the use of
367	stipulated facts and shall provide for the admission of prepared
368	testimony.
369	(c) In administrative proceedings challenging the issuance
370	or denial of a certificate of need, only applicants considered

or denial of a certificate of need, only applicants considered 370 371 by the agency in the same batching cycle are entitled to a comparative hearing on their applications. Existing health care 372 373 facilities may initiate or intervene in an administrative 374 hearing upon a showing that an established program will be 375 substantially affected by the issuance of any certificate of 376 need, whether reviewed under s. 408.036(1) or (2), to a competing proposed facility or program within the same district. 377

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378	With respect to an application for a general hospital, competing
379	applicants and only those existing hospitals that submitted a
380	detailed written statement of opposition to an application as
381	provided in this paragraph may initiate or intervene in an
382	administrative hearing. Such challenges to a general hospital
383	application shall be limited in scope to the issues raised in
384	the detailed written statement of opposition that was provided
385	to the agency. The administrative law judge may, upon a motion
386	showing good cause, expand the scope of the issues to be heard
387	at the hearing. Such motion shall include substantial and
388	detailed facts and reasons for failure to include such issues in
389	the original written statement of opposition.
390	(6) JUDICIAL REVIEW.—
391	(d) The party appealing a final order that grants a general
392	hospital certificate of need shall pay the appellee's attorney's
393	fees and costs, in an amount up to \$1 million, from the
394	beginning of the original administrative action if the appealing
395	party loses the appeal, subject to the following limitations and
396	requirements:
397	1. The party appealing a final order must post a bond in
398	the amount of \$1 million in order to maintain the appeal.
399	2. Except as provided under s. 120.595(5), in no event
400	shall the agency be held liable for any other party's attorney's
401	fees or costs.
402	Section 11. Paragraph (d) of subsection (1) of section
403	408.040, Florida Statutes, is amended to read:
404	408.040 Conditions and monitoring
405	(1)
406	(d) If the holder of a certificate of need or the holder of
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25-01997-19 20191712 407 an exemption fails to comply with a condition that is unrelated 408 to the provision of charity care or the provision of care under 409 the Florida Medicaid program upon which the issuance of the 410 certificate or exemption was predicated, the agency may assess 411 an administrative fine against the certificateholder or 412 exemption holder in an amount not to exceed \$1,000 per failure 413 per day. If the holder of a certificate of need or the holder of an exemption fails to comply with a condition related to the 414 415 provision of charity care or the provision of care under the 416 Florida Medicaid program upon which the issuance of the 417 certificate or exemption was predicated, the agency must assess 418 an administrative fine against the certificateholder or 419 exemption holder in the amount of \$2,500 per day for each 420 instance of noncompliance. Failure to annually report compliance 421 with any condition upon which the issuance of the certificate or 422 exemption was predicated constitutes noncompliance. In assessing 423 the penalty, the agency shall take into account as mitigation 424 the degree of noncompliance. Proceeds of such penalties shall be 425 deposited in the Public Medical Assistance Trust Fund. 426 Section 12. Subsection (1) of section 408.043, Florida 427 Statutes, is amended to read: 428 408.043 Special provisions.-429 (1) OSTEOPATHIC ACUTE CARE HOSPITALS. - When an application 430 is made for a certificate of need to construct or to expand an 431 osteopathic acute care hospital, the need for such hospital 4.32 shall be determined on the basis of the need for and 433 availability of osteopathic services and osteopathic acute 434 hospitals in the district. When a prior certificate of need to 435 establish an osteopathic acute care hospital has been issued in

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436	a district, and the facility is no longer used for that purpose,
437	the agency may continue to count such facility and beds as an
438	existing osteopathic facility in any subsequent application for
439	construction of an osteopathic acute care hospital.
440	Section 13. Subsection (5) of section 395.1065, Florida
441	Statutes, is amended to read:
442	395.1065 Criminal and administrative penalties;
443	moratorium
444	(5) The agency shall impose a fine of \$500 for each
445	instance of the facility's failure to provide the information
446	required by rules adopted pursuant to <u>s. 395.1055(1)(g)</u> s.
447	395.1055(1)(h) .
448	Section 14. This act shall take effect July 1, 2019.

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