

FLORIDA CENTER FOR
HEALTH INFORMATION
AND TRANSPARENCY

2018

ANNUAL REPORT



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EXECUTIVE SUMMARY

The Agency for Health Care Administration's *Florida Center for Health Information and Transparency* (Florida Center), within the Division of Health Quality Assurance, serves as a primary information source for the public to access data and information about Florida-licensed healthcare providers, costs, quality, and the use of health information technology across the state. The Florida Center leads the Agency's public transparency initiatives, including administration of the FloridaHealthFinder.gov and new FloridaHealthPriceFinder.com consumer websites. Together the websites give users a full range of valuable, objective information about our state's health care providers – enabling them to make more informed decisions.

The Florida Center is organized into four offices: Data Collection and Quality Assurance, Data Dissemination and Transparency, Health Information Exchange, and Risk Management/Patient Safety. The individual accomplishments of each office are described in this report. Section 408.062(1)(j), Florida Statutes, directs the Florida Center to publish an annual status report on the collection of data and publication of health care quality measures – which is also covered in this publication. Highlights from this 2018 annual report include:

- Launched the first phase of FloridaHealthPriceFinder.com consumer transparency website, recognized by the National Center for Digital Government with a 2018 Digital Achievement award.
- Finalized the Claims Data Submission rule for Health Insurer paid claims submissions, setting the cornerstone for statewide health care claims data collection and the provision of unprecedented price transparency for Floridians.
- Developed a strategic plan to modernize the 10 year old hospital and ambulatory surgery center discharge data collection and availability process.
- Enhanced the Agency Incident Reporting System (AIRS), simplifying statutorily required adverse incident annual reporting and claims liability reporting for Florida providers.
- Completed an environmental scan and interoperability roadmap for statewide Health Information Exchange (HIE), establishing key priorities and objectives to support widespread adoption.
- Sponsored the Pediatric Cardiac Technical Advisory Panel (PCTAP) in 26 public meetings to develop a comprehensive set of recommended standards for pediatric cardiac surgery programs.

For more information about these accomplishments and the additional activities of the Florida Center, please visit our website or contact our office at (850) 412-3730.

The Florida Center also supports and maintains a set of informative websites:

www.FloridaHealthFinder.gov

www.FloridaHealthPriceFinder.com

www.fhin.net

www.florida-hie.net

INTRODUCTION

The *Florida Center for Health Information and Transparency* (Florida Center) is established under section 408.05, Florida Statutes (F.S.), and is additionally guided by sections 408.051, 408.061, 408.0611, 408.062, 408.063, F.S., to collect, coordinate, analyze, and disseminate health-related data and information; and to promote the use of health data and information to improve care. The Florida Center operates as a bureau within the Agency's Division of Health Quality Assurance, and works to ensure that the Agency and the public have timely and reliable information through the collection, analysis, and sharing of health care data.

Supporting AHCA's mission of *Better health care for all Floridians*, the Florida Center collects, maintains, analyzes, and publishes data from healthcare providers, health plans, and others – and makes allowable portions of the data available and ready to use. The data are the foundation for the Agency's award winning public transparency initiatives – FloridaHealthFinder.gov and FloridaHealthPriceFinder.com – which together provide a wealth of information in a public-friendly format. The Florida Center also promotes adoption of health information technology (HIT) that improves documentation, management, and timely provision of patients' medical information among authorized providers. The achievement of true interoperability across Electronic Health Records (EHRs) and Health Information Exchange (HIE) networks can improve care coordination and quality outcomes for patients and their caregivers.

The Florida Center is organized into four offices: the Office of Data Collection and Quality Assurance, the Office of Data Dissemination and Transparency, the Office of Health Information Exchange and Policy Analysis, and the Office of Risk Management and Patient Safety. Highlights and accomplishments from each office are included in the following sections of this report.

OFFICE OF DATA COLLECTION AND QUALITY ASSURANCE

DATA COLLECTION IS AUTHORIZED AND GUIDED BY SECTION 408.061, FLORIDA STATUTES, AND FURTHER DEFINED IN CHAPTERS 59B-9 AND 59E-7 OF THE FLORIDA ADMINISTRATIVE CODE

The *Office of Data Collection and Quality Assurance* collects administrative discharge data from all Florida-licensed hospitals, emergency departments (EDs), and ambulatory surgery centers (ASCs); and ensures the highest possible quality and integrity of submitted data. Florida's facilities are required to submit quarterly batched files of detailed administrative data from every patient admission, and to certify their data as accurate and complete within five (5) months of the calendar quarter reported. The datasets undergo a rigorous audit process during submission, and is recognized nationally for its quality and reliability. The files are compiled into a statewide, standardized database of de-identified information that is of great value and importance to Florida's provider community, researchers, and the public. The historical data date back approximately twenty years and research datasets are available for [order](http://www.floridahealthfinder.gov/Researchers/OrderData/order-data.aspx)¹ by authorized individuals. Limited analysis tools and aggregate (HIPAA compliant) data exports are also available online at any time through the Agency's free [patient data query tool](http://www.floridahealthfinder.gov/QueryTool/QTResults.aspx?T=1).²

¹ <http://www.floridahealthfinder.gov/Researchers/OrderData/order-data.aspx>

² <http://www.floridahealthfinder.gov/QueryTool/QTResults.aspx?T=1>

The Florida Center commissioned an extensive analysis of the existing data collection information systems and process during 2018, which are nearly twenty years old and approaching end of life. An experienced management consulting partner was procured to perform the assessment and facilitate development of a strategic modernization plan for this core Agency function. The modernization plan was completed in July, and the Agency subsequently submitted a Legislative Budget Request (LBR) for consideration during the 2019 legislative session to develop and implement a new collection system.

Hospital Inpatient Data

The hospital inpatient files include data from every patient admission at any Florida-licensed acute care, long-term care, and psychiatric hospital. The total number of hospital inpatient visits that occur in Florida each year has increased from 2,386,661 discharges in 2002 to 2,846,938 discharges that occurred during calendar year 2017 – the most recently available calendar year

Since most hospital admissions are reported to the Agency several months after they occur and may require multiple submissions – the Florida Center monitors the ongoing workload of data collection analysts by the number of files received and processed by analysts rather than by the number of visits reported. The Florida Center actively tracks, in near real-time, the volumes of successful and unsuccessful data submissions as well as the number of error-free files accepted and certified.

Active business analytics enable the Agency to monitor not only its internal workload and efficiency but also provide indicators to help measure the burden of reporting among providers. The current process requires a substantial amount of manual handling of data files by Florida Center staff; and is both burdensome and time consuming for providers and staff, especially in cases where the submitted data files contain errors. There were a total of 20,081 attempted inpatient hospital file submissions during 2018, of which 7,326 (36.5%) immediately “failed” submission due to XML formatting or other errors, while the remaining 12,755 (63.5%) were received and processed by Agency analysts. Of those received, 9,722 (76%) were returned to the submitter for corrections due to data errors identified during the audit process; and 3,553 (24%) were accepted and certified as error-free. Across all reporting hospitals during the calendar year, there were an average of 5.6 attempted inpatient file submissions for each “clean” file accepted and certified.

Ambulatory Surgery Data

Data from outpatient surgical procedures are submitted from approximately 668 Florida facilities, including hospital-based and free-standing ambulatory surgery centers (ASCs), short-term acute care hospitals, lithotripsy centers, and cardiac catheterization laboratories. Reportable ambulatory surgery visits are those with documented primary procedures in Current Procedural Terminology (CPT™) code ranges: 10021 through 69999, 92980 through 92998, and 93451 through 93462. Facilities that perform less than 200 of these procedures during a calendar quarter may request an exemption from reporting for that quarter. There were a total of 3,069,981 outpatient/ambulatory surgeries that occurred in Florida during 2017 - the most recently available calendar year.

Although the ambulatory surgery and emergency department datasets are submitted as separate and distinct file types, the Agency’s current tracking system counts and groups both types together as *outpatient* data files. Under this combined definition, there were a total of 39,965 attempted outpatient file submissions during 2018, of which 16,732 (42.0%) immediately failed submission due to XML formatting or other errors, and 23,233 (58%) were received and processed by Agency analysts. Of those received, 16,569 (71%) were returned to the submitter for corrections due to data errors identified during the audit process and 7,310 (29%) were accepted and certified as error-free. Across all reporting facilities during the calendar year, there were an average of 5.5 attempted outpatient file submissions for each “clean” file received and certified.

Emergency Department Data

Emergency Departments (aka: Emergency Rooms, EDs, and/or ERs) were the first entities in Florida required to submit data to the Agency, beginning in 2005. Florida statute defines ED visits as all patient encounters where ED registration occurred but the patient was *not* admitted to a hospital for inpatient care. ED registration records include similar information as the inpatient files, but also include the acuity level, which indicates the level of seriousness of the patient’s condition. The volume of ED records collected each year has grown from approximately 5.7 million visits in calendar year 2005 to more than 8.9 million visits during calendar year 2017.

Section 408.062 of the Florida Statutes requires that the Agency produce an annual report on the use of emergency department services in Florida, by patient acuity level, to the Governor, the Speaker of the House of Representatives, and the President of the Senate. A collection of previous years’ annual [Emergency Department Utilization Reports](#)³ is published on [FloridaHealthFinder.gov](#)⁴.

OFFICE OF DATA DISSEMINATION AND TRANSPARENCY

DATA DISSEMINATION AND TRANSPARENCY IS AUTHORIZED AND GUIDED BY SECTIONS 408.05, 408.062, AND 408.063, FLORIDA STATUTES.

The *Office of Data Dissemination and Transparency* performs multiple functions to ensure the public has access to health care data and information that enables well-informed health care decisions. This office received, processed, and fulfilled more than 5,400 custom and ad-hoc data requests in 2018, and provided customers with technical assistance regarding the datasets. The office also executes hundreds of data use agreements each year with authorized government, public, and private entities. The office works closely with the HIPAA Compliance Officer, within the Agency’s Office of Inspector General, to ensure all policies and processes relating to the analysis, aggregation, publication, and release of data fully comply with all applicable state and federal laws and regulations.

The Office of Data Dissemination and Transparency leads the Agency’s public transparency efforts through administration and management of the Agency’s two consumer-targeted public transparency websites – [FloridaHealthFinder.gov](#) and the new [FloridaHealthPriceFinder.com](#).

³ <http://www.floridahealthfinder.gov/researchers/studies-reports.aspx>

⁴ <http://www.floridahealthfinder.gov/index.html>

FLORIDAHEALTHFINDER.GOV

The national award winning website, FloridaHealthFinder.gov was first established in 2007 to provide Floridians with available healthcare performance and quality data, in an understandable way, to help them make more informed health care decisions. Over the past decade, the website has evolved into a comprehensive suite of valuable resources and tools. The most popular feature is the *Facility Locator*, which offers basic and advanced search options allowing users to narrow their search from more than 48,000 licensed providers. The provider information is updated nightly, directly from the Agency’s electronic licensure databases. Individual provider profile pages offer direct access to important licensure, certification, and owner information along with direct linkage to relevant regulatory compliance documentation such as inspection reports and legal orders. FloridaHealthFinder.gov also features specialized tools for users to compare quality measures and performance among hospitals, ambulatory surgery centers, emergency departments, nursing homes, assisted living facilities, home health agencies, and health insurance plans. There are also specialized tools to compare prices for prescription drugs and common medical procedures. The site receives more than **three million visitors** each year and has won multiple national awards for its value and innovation.

FloridaHealthFinder.gov was redesigned in 2017 with a more welcoming appearance and simplified navigation. Additional redesign elements initiated during 2018 include transforming how users access and view information in the various compare tools as well as reformatting both the facility locator and profile pages.

FloridaHealthFinder.gov is your site for

Easy access to health care information.

Studies show that public reporting of provider performance is a key element that promotes enhanced patient care and consumer choice.

[Locate a Facility or Provider](#)

compare

Compare quality and services.

- [Assisted Living Facilities](#)
- [Health Plans](#)
- [Home Health Agencies](#)
- [Hospitals / Ambulatory Surgery Centers / Physicians](#)
- [Medicaid Health Plan Report Card](#)
- [Nursing Homes](#)

price

Compare pricing on conditions and service bundles with our new consumer pricing website.

[FloridaHealthPriceFinder](#)

[Prescription Drug Prices](#)

locate

Find and learn about health care facilities and providers in your area.

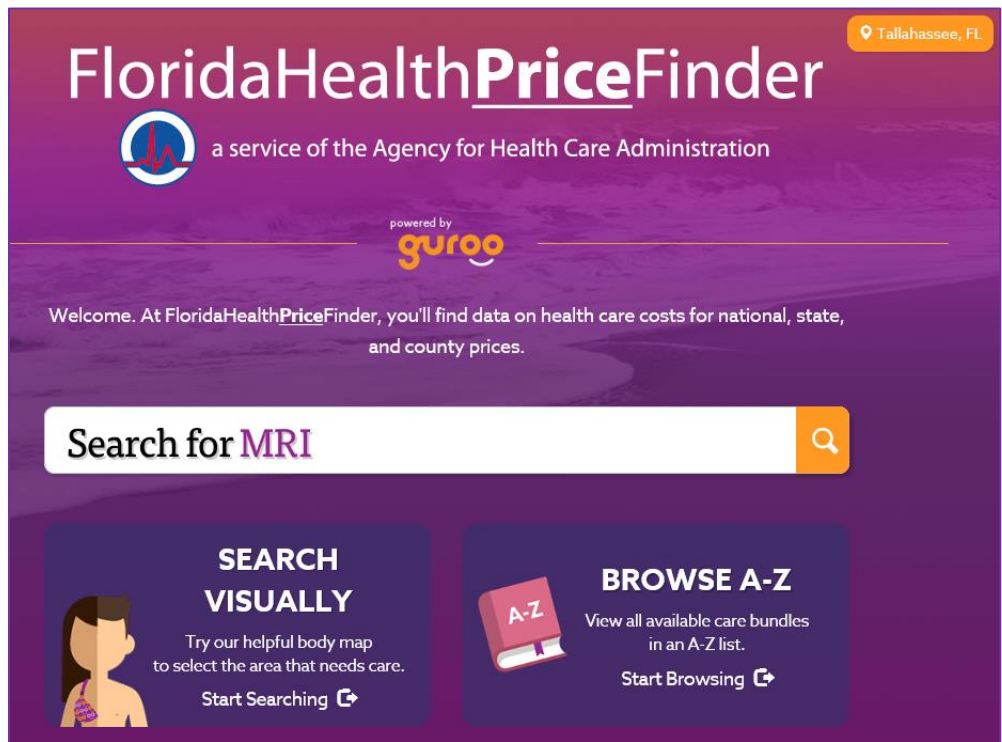
- [Doctors and Specialists](#)
- [Facilities or Providers](#)
- [Inspection Reports / Final Orders](#)
- [New Provider / Owner Dashboard](#)

FLORIDAHEALTHPRICEFINDER.COM

Section 408.05, Florida Statutes, was amended by the Florida Legislature in 2016 to increase transparency of healthcare costs for consumers. The Florida Center was directed to contract with a national vendor to create a price transparency website that displays how much healthcare facilities and providers in Florida are typically paid by insurance companies for common procedures, based on data from actual paid claims.

The Agency contracted with the Health Care Cost Institute (HCCI) and the new *FloridaHealthPriceFinder.com* was launched in November of 2017. The site currently displays the average amount paid (and range of payments) by commercial insurance plans in major metropolitan areas of Florida for up to 295 bundles of non-emergency healthcare services. Based on HCCI’s established national database and methodology, the information is presented as *care bundles* which represent the most common set of services associated with a specific procedure or condition. The site also provides information and resources to assist consumers in planning for their future healthcare services. The new website was recognized by the Center for Digital Government in 2018 with a **Government Experience Award** for connecting citizens with important information.

A new version of the website was developed during 2018 to display the average payment and range of payments for 61 service bundles at each Florida-licensed hospital and Ambulatory Surgery Center (ASC), allowing users to compare prices across providers in their area. The provider-level pricing model relies on robust data to produce actuarially reliable estimates. The enhanced site is slated for public launch in 2019, once enough data has been collected and processed to ensure the site provides meaningful and trustworthy information to users. The new *Health Care Claims Data Collection Rule* was finalized and became effective on April 2, 2018. Required health insurance plans and health maintenance organizations began submitting claims data to the Agency’s vendor in early 2019.



COMMUNITY OUTREACH AND EDUCATION

The Office of Data Dissemination and Transparency actively engages stakeholders year-round through the State Consumer Health Information and Policy Advisory Council and other forums to solicit feedback about information important to consumers and the public, including how to most effectively present that information to a variety of distinct audiences. The Data Dissemination outreach team designs and produces informational materials and promotional items which are distributed through multiple Agency staff and partner organizations at industry conferences and events. The team also directly attends and presents at a number of events each year, along with supplying presentation materials and talking points to AHCA leadership team members for their own presentations at various professional gatherings. Additionally, the Office hosts routine and on-demand webinars that provide users with a fully guided tour of each website and the types of information made available by the Agency. A total of eighty-seven dedicated instructional webinars were conducted during 2018, serving more than 1,600 health care professionals, patients, caregivers, and citizens.

The Office also ensures that the Agency's health care transparency initiatives are prominently highlighted on the Agency's public website as well as through formal press releases when appropriate. The outreach team worked with the Agency's onsite multi-media production services during 2018 to rebrand outreach materials with a new theme: "Transparency is Catching On"



Measuring Success

The Office of Data Dissemination and Transparency actively monitors for reach and effectiveness of the Agency's transparency efforts through multiple channels. Each of the two transparency websites are hosted and maintained under separate vendor contracts, and each vendor is responsible to provide monthly detailed analytic reporting on website utilization along with the findings from imbedded user surveys. The Office solicits ongoing feedback regarding the sites and available information through the State Consumer Health Information Advisory Council, internal feedback channels, and our partner professional organizations. The Agency's informational webinars include an open question and comment period and also integrate an end of session viewer survey about the site(s) and presentation. The feedback generated through these mechanisms has been invaluable to the team and has served to guide recent transformations and improvements.

OFFICE OF RISK MANAGEMENT AND PATIENT SAFETY

ADVERSE INCIDENT REPORTING IS REQUIRED BY SECTIONS 395.0197, 641.55, 400.147, AND 429.23, FLORIDA STATUTES, AND IS FURTHER DEFINED BY FLORIDA ADMINISTRATIVE RULES.

The Office of Risk Management and Patient Safety (RMPS) is responsible for the intake, review, and appropriate referral of adverse incidents that occur in Florida-licensed hospitals, ambulatory surgical centers (ASCs), assisted living facilities (ALFs), nursing homes, and certain health management organizations (HMOs). Reportable adverse incidents are defined in Florida statutes and information about these incidents, including the identity of the reporting providers, is strictly confidential once reported to the Agency. Florida Center analysts, primarily registered nurses, review each submitted adverse incident report to ensure that they are complete and understandable, to identify whether the incident potentially involves conduct by a health care professional who may be subject to disciplinary action, and to identify facts that may require the reporting facility and/or Agency to notify additional regulatory agencies (such as the Department of Elder Affairs or the Agency for Persons with Disabilities, or others). Once accepted as complete, the adverse incident reports are referred to the Agency's Complaint Administration Unit to determine whether further investigation by field office surveyors is warranted.

The Agency developed and launched the first phase of a new electronic reporting system for adverse incidents in 2017. The system, known as the *AHCA Incident Reporting System*, or "AIRS", was designed to streamline and simplify submission of the reports for both providers and Agency staff by eliminating a number of redundant and manual processes. Phase 2 of the system was executed during 2018, which added a module for providers to submit required annual risk management reports. Enhancements were also implemented during the year to improve how the Agency tracks and uses the reported information. Additional modules currently under development for implementation in 2019 include a module for mandatory Elder Justice Act reporting and a separate module for nursing home federal reporting.

The number of reporting facilities and the number of incidents rises each year. The Office received and reviewed at least 7,895 reported adverse incidents from Florida health care facilities during calendar year 2018, nearly twice the number of incidents that were reported during calendar year 2014. In addition to a larger number of facilities, improved monitoring, educational efforts, and technical assistance by Agency staff has led to more complete and accurate reporting by providers.

The Florida Center publishes quarterly and annual aggregate data on adverse incidents for all facility types on the Office of Risk Management and Patient Safety webpage:

<http://ahca.myflorida.com/SCHS/RiskMgtPubSafety/RiskManagement.shtml>.



OFFICE OF HEALTH INFORMATION EXCHANGE AND POLICY ANALYSIS

The Office of Health Information Exchange and Policy Analysis provides administrative and financial support to the Agency's Health Information Technology (HIT) initiatives. The office is primarily guided by sections 408.051 and 408.0611, Florida Statutes, as well as federal regulations governing HIT and Medicaid information.

The office is organized into two collaborative teams:

- *Medicaid Electronic Record (EHR) Incentive Program*
- *Health Information Exchange*

MEDICAID ELECTRONIC HEALTH RECORD (EHR) INCENTIVE PROGRAM

The Florida Center is responsible for statewide administration and management of the *Florida Medicaid Electronic Health Record (EHR) Incentive Program*. The federal Health Information Technology for Economic and Clinical Health (HITECH) Act of 2009 provides 100 percent federal financial participation (FFP) for incentive payments paid to eligible Medicaid providers for adopting, implementing, and demonstrating meaningful interoperability of their EHR systems. The HITECH Act also covers 90 percent of the state's operational costs for administration of the program and to promote EHR adoption statewide.

The incentive program is governed by the U.S. Centers for Medicare & Medicaid Services (CMS), and is administered through individual state Medicaid agencies. The program requires each state to develop and update annually a State Medicaid Health Information Technology Plan (SMHP). Florida's plan was originally approved December 2, 2010 and is updated and submitted to CMS for re-approval annually each December.

The CMS also established the federal rules for EHR interoperability that include a set of standards, implementation specifications, and certification criteria for EHR technology. The requirements and measures are focused on advancing the use of EHR technology and secure Health Information Exchange (HIE) to improve patient care. Eligible providers and hospitals must successfully demonstrate specific standards to qualify for incentive payments.

Florida's Medicaid EHR Incentive Program began on September 5, 2011. As of December 21, 2018, the Agency has issued at least 16,887 individual incentive payments to 9,081 unique eligible professionals and 535 incentive payments to 182 eligible hospitals. In total, the Agency has processed and administered more than \$578,124,452 in federal incentive funds to Florida providers since the program's inception. The Florida program also aligned with a new national focus in 2018 on *Promoting Interoperability*, replacing the previous theme of "meaningful use" of health information technology.



***For Information on eligibility
and other program details:***

www.ahca.myflorida.com/medicaid/ehr/

HEALTH INFORMATION EXCHANGE

CREATION OF A STATEWIDE HEALTH INFORMATION NETWORK INCLUDING ADOPTION AND USE OF ELECTRONIC HEALTH RECORDS IS GUIDED BY SECTION 408.062, FLORIDA STATUTES.

Florida Health Information Exchange (HIE) Services (formerly known as the Florida-HIE) has been enabling the secure exchange of patient's health information between authorized health care providers since 2011. The services have evolved based on feedback and recommendations from active users of the technology as well as other interested providers, stakeholders, and the public. Currently, Florida-HIE Services offers:

- ☞ Assistance connecting to the national **e-Health Exchange** – including technical support and a secure gateway to this primary national network through which providers can transmit and receive various types of patient information, usually through their Electronic Health Record (EHR) system.
- ☞ A **Direct Secure Messaging Service (DMS)** – encrypted, HIPAA compliant, and affordable email service that can be accessed over any internet connection, allows providers to transmit and receive information from other registered providers, and does not require the use of an EHR system.
- ☞ **Encounter Notification System (ENS)** – receives real-time Admit/Discharge/Transfer (ADT) data messages from hospitals and other data sources, performs identity matching against a registered panel of patients, and forwards appropriate alerts to subscribing health plans and providers informing them about their patients' healthcare encounters.

Florida HIE Services is currently operated under a no-cost agreement with the Agency's vendor, Audacious Inquiry (Ai). The Agency governs and supports Florida HIE Services by establishing and refining related policy, convening stakeholders, providing contract management and oversight, engaging federal partners, and promoting the benefits of health information technology to providers and stakeholders.

The Encounter Notification Service (ENS) remained the most popular and fastest growing service offering of Florida HIE services through 2018, continuing a steady positive growth trend since inception in 2013. The Agency piloted ENS with one health system and one health plan in 2013 and now supports 216 participating data source hospitals (96% of acute care beds in Florida) pushing real-time alerts out to at least 86 subscribing organizations including health plans, Accountable Care Organizations (ACOs) and health care providers. A total of more than 14.5 million notifications have been sent to subscribers since 2015. The number of patients covered by the service nearly doubled during 2018 from 4.2 million in January 2018 to more than 8 million in December. The service currently transmits an average of nearly 1 million alerts each month – creating 1 million opportunities for improved care coordination and quality.

ENS capabilities were expanded in 2018 to allow the filtering of alerts, enabling the newly contracted Medicaid Dental Plans to subscribe and receive only emergency department visit notifications for selected dental codes. The ENS was also leveraged during 2018 to provide an inpatient data feed, with primary identifiers removed, to the Florida Department of Health's Syndromic Surveillance program. The Syndromic Surveillance program previously relied only on emergency department data, and the addition of inpatient data greatly enhances the department's ability to conduct thorough surveillance, including identification of issues that may be occurring within a facility.

The ENS has also evolved into a useful tool for the state during times of emergency response from natural disasters or other large scale emergency events. The Emergency Census capability of ENS was demonstrated in 2018 during Hurricane Michael. Upon the declaration of a state of emergency, and at the direction of the Agency, the Florida HIE ceased the routine purge of hospital encounter data from ENS, resulting in a temporary, statewide, searchable hospital census that could be used to locate displaced persons after the storm. Approximately 150 displaced persons were located using this tool. The routine purge of hospital encounter data was resumed upon the end of the declared state of emergency.

During 2018, the Office of HIE and Policy Analysis procured the management consulting services of the North Highland Company to conduct a detailed study of the Health Information Exchange environment in Florida. The vendor provided a comprehensive assessment of the current state of interoperability in Florida, along with recommendations for achieving an ideal state, as jointly envisioned by the Agency and participating stakeholders. The resulting HIE Interoperability Roadmap document presents strategies for the Agency across a 5 year strategic roadmap, focusing on increasing provider engagement and overall interoperability. The Agency's work has subsequently refocused on ensuring adequate statewide governance for exchange activities as well as promoting adoption, awareness, and better understanding of the value of interoperability and exchange in improving healthcare quality and outcomes.

The Office also works to support the expansion of HIE utilization through regional networks, where most exchange routinely occurs. The Office solicited and received approval from the federal CMS to award federal funding through grant contracts to three regional exchange organizations during 2018 for the purpose of expanding their networks and connecting additional providers.

HEALTH IT OUTREACH AND EDUCATION

The Agency conducts extensive outreach and education to inform providers about the benefits of utilizing EHRs, HIE, Telehealth, and other Health Information Technologies. A dedicated HIE outreach team works to establish and maintain productive relationships with a wide variety of health professional organizations, health IT champions, health technology adopters, and other interested parties to ensure that the most timely, relevant, and reliable information is available to Florida providers at all times. Federal guidance, regulations, certification criteria, and best practices have evolved at expedited rates following the passage of the HITECH Act in 2009, requiring continual learning and adaptation among all program staff. The outreach team, charged with informing Florida's health care professionals of these evolving policies and the values associated with participation, attended and sponsored 101 separate education events for providers during 2018. Education sessions were offered through regular Agency-sponsored webinars, participation at provider-targeted conferences and meetings, and speaking engagements with professional associations. The Office also hosted an inaugural HIE Users Summit in central Florida during July, where more than 140 active and prospective users of the technology convened for a full day to openly share information and best practices, and to discuss strategies for improving interoperability across the state. The HIE Outreach team initiated an aggressive social media campaign during 2018, ensuring multiple daily posts across multiple Twitter, Facebook, and LinkedIn accounts.

COMMITTEES AND COUNCILS

The Florida Center provides administrative and staff support to a variety of statutorily designated committees and councils. In accordance with Florida's open government "Sunshine" and public records laws, all committees and councils assigned to the Agency are required to provide advance public notice of all meetings through the Florida Administrative Register (FAR), to ensure meetings and business are conducted in a forum that allows for open public participation, and to maintain minutes of all meetings and discussions.

Florida Center staff work closely with committee and council chairs and members to coordinate meeting schedules and logistics, develop topics and agendas, compile and produce meeting materials, ensure proper public notices and disclosures, ensure proper meeting documentation, and develop and produce any committee/council work products and reports. Meetings are often scheduled in varying regions of the state to allow for wider stakeholder and public participation; requiring additional coordination with a number of external stakeholders who assist with identifying suitable meeting venues and other needed accommodations.

STATE CONSUMER HEALTH INFORMATION AND POLICY ADVISORY COUNCIL

The *State Consumer Health Information and Policy Advisory Council (Advisory Council)* is established by and assigned to the Florida Center under section 408.05, Florida Statutes. The mission of the Advisory Council is to provide insight and expertise to the Agency regarding the publication and dissemination of health-related data and statistics. Advisory Council goals include identifying, standardizing, and sharing of health-related data across federal, state, local and private stakeholders. Required council membership is intended to encourage cross-sector participation and awareness, and is defined in statute. Members are appointed by their respective Agency directors or the Secretary of Health Care Administration. The Advisory Council meets at least quarterly, either in person or by web-conference. An ad-hoc *Data Standards and Transparency Sub-committee* of Advisory Council members and invited subject matter experts also convenes as needed to perform deeper analysis and discussion around specific data-related topics. Advisory Council meeting information and materials can be found at: <http://ahca.myflorida.com/SCHS/CommitteesCouncils/chis.shtml>

HEALTH INFORMATION EXCHANGE COORDINATING COMMITTEE

The Health Information Exchange Coordinating Committee (HIECC) was created in December 2007 to advise the Agency in developing and implementing a strategy to establish a privacy-protected, secure, and integrated statewide network for the exchange of electronic health records, as required by §408.062(5), Florida Statutes. The HIECC was established as a sub-committee of the Advisory Council, although there is little overlap in membership among the two groups. The HIECC members, as approved by the Advisory Council, represent a wide variety of stakeholders from health care provider organizations that are actively engaged or interested in participating in health information exchange, payers, and government agencies. The HIECC meets at least quarterly, either in person or by web-conference.

HIECC meeting information and materials can be found at:
<http://www.fhin.net/committeesAndCouncils/hiecc.shtml>

HEALTH INFORMATION EXCHANGE LEGAL WORK GROUP

A separate Health Information Exchange Legal Work Group was formed as a dedicated sub-committee to the HIECC, comprised primarily of invited legal counsel and policy experts, to focus on resolving the complex legal and privacy issues related to the Florida HIE. The Legal Work Group meets in person at least annually to review and update the Florida HIE participation agreements and guide(s).

Legal Work Group meeting information and materials can be found:

<http://www.fhin.net/committeesAndCouncils/lwg.shtml>

PEDIATRIC CARDIAC TECHNICAL ADVISORY PANEL (PCTAP)

Section 395.1055, Florida Statutes, was amended in 2017 and 2018 to establish a Pediatric Cardiac Technical Advisory Panel (PCTAP), assigned to the Agency. The Panel is charged to develop procedures and standards for measuring outcomes of pediatric cardiac catheterization and open heart surgery programs; and to make recommendations to the Agency for rules that implement those standards. The PCTAP members are pediatric cardiac specialists and surgeons appointed by the state's existing licensed hospital-based pediatric cardiac surgery programs, along with at-large representatives appointed by the Agency Secretary. The Office of Data Dissemination and Transparency facilitated twenty-six (26) duly noticed public meetings of the PCTAP during 2018, and assisted the group in finalizing the development of recommendations for comprehensive standards of care for pediatric cardiac surgery programs. A dedicated website was created for the panel, which can be found at: <http://www.ahca.myflorida.com/SCHS/PCTAP/>

BONE MARROW TRANSPLANT ADVISORY PANEL

The Bone Marrow Transplant Advisory Panel (Panel) was established in 2010 under section 627.4263, Florida Statutes, and meets at least biennially to discuss evolving research from the federal Agency for Health Care Policy, National Cancer Institute, National Academy of Sciences, Centers for Medicare and Medicaid Services, Congressional Office of Technology Assessment, and others, related to bone marrow transplantation. The panel reviews scientific evidence to ensure that recommendations made to the Agency and subsequently entered into rule are based on current research findings, with an intent to ensure that insurance policies offer coverage for the latest medically acceptable bone marrow transplant procedures. The Panel provided updated recommendations in 2018 for procedures to be included in Florida Administrative Rule 59B-12.001 (Bone Marrow Transplantation). The rule changes are ending final adoption.

STATUTORILY MANDATED REPORTING

The Florida Center, in collaboration with the Agency Business Analytics Team, produces a variety of legislatively required reports and data updates each year on behalf of the Agency. FloridaHealthFinder.gov serves as a clearinghouse for many of the current and historical reports:

<http://www.floridahealthfinder.gov/researchers/studies-reports.aspx>.

Additional reports and data are published on topic-specific websites. Below is a summary of the legislatively required reporting activities conducted in the Florida Center during 2018.

HEALTH CARE DATA: Section 408.062(j), Florida Statutes, requires the Agency to make available and update quarterly data regarding patient charges, volume, length of stay, and provider performance. This information is published through FloridaHealthFinder.gov and updated quarterly based on data submitted from health care facilities and available national quality metrics.

NURSING HOME GUIDE: Section 400.191(2), Florida Statutes, requires the Agency to publish a nursing home guide in electronic format to assist consumers and their families in comparing and evaluating nursing home facilities. The guide must be updated quarterly. The Nursing Home Guide is a permanent feature on FloridaHealthFinder.gov and is updated quarterly.

PRESCRIPTION DRUG PRICES: Section 408.062(1)(h) was revised in 2017 and requires the Agency to collect a statistically valid sample of retail prices charged by pharmacies for the 300 most frequently prescribed medicines. If the drug is available generically, price data shall be reported for the generic and brand-named drug. The prices must be for a 30-day supply at a standard dose, by pharmacy and by metropolitan statistical area or region, and updated monthly. The Agency provides this information through the [MyFloridaRx⁵](#) website, in coordination with the State Attorney General's Office. A prominent link to MyFloridaRx is directly accessible on FloridaHealthFinder.gov

ADVERSE INCIDENT QUARTERLY AND ANNUAL REPORTS: Section 395.0197(8), Florida Statutes, requires the Agency to produce a summary trend analysis of reported Adverse Incidents on a quarterly basis; and requires an annual report of the number of facilities reporting and the number of incidents reported. The Florida Center developed a new electronic format for these reports during 2016-2017, allowing them to be updated automatically from the Agency's electronic reporting system. The new electronic Annual and Quarterly Adverse Incident Reports are published on the Agency's website under the [Office of Risk Management and Patient Safety⁶](#).

⁵ <http://www.myfloridarx.com/>

⁶ <http://ahca.myflorida.com/SCHS/RiskMgtPubSafety/RiskManagement.shtml>

HEALTH PLAN QUALITY INDICATORS: Health plans are required to submit quality of care and patient satisfaction information to the Agency annually as specified in 59B-13 and 59B-14, Florida Administrative Code. Specifications for quality of care indicators are derived from the national Healthcare Effectiveness Data and Information Set (HEDIS), including measures for adolescent well-care visits, well-child visits, diabetes care, and other information. Data regarding member satisfaction is obtained from the national Consumer Assessment of Health Plans Survey (CAHPS®). This data is compiled and analyzed then findings are publicized on the Agency’s consumer Transparency website, FloridaHealthFinder.org.

FLORIDA CENTER ANNUAL REPORT: Section 408.062(1)(j), Florida Statutes, requires the Florida Center to submit an annual status report on the collection of data and publication of health care quality measures to the Governor, the President of the Senate, the Speaker of the House of Representatives, and substantive legislative committees.

ANNUAL REPORT ON THE USE OF EMERGENCY DEPARTMENT SERVICES: Section 408.062 (1)(i), Florida Statutes, requires the Florida Center to produce an annual report of Emergency Room utilization, with acuity levels, and provide the information to the Governor, the Speaker of the House, the Senate President, and substantive legislative committees.

FLORIDA ELECTRONIC PRESCRIBING ANNUAL REPORT: Section 408.0611 (4), Florida Statutes, requires the Agency to produce a report of electronic prescribing rates and capabilities among health care practitioners, health care facilities, and pharmacies.

STATE HEALTH EXPENDITURES ANNUAL REPORT: Section 408.063(5), Florida Statutes, requires a comprehensive report of state health expenditures that identifies the contribution of health care dollars made by all payers, and the dollars expended by type of health care service in Florida.