Five Years of Quality
Working Together to Prevent Harm, Save Lives and Reduce Costs
A BOLD VISION: Become a National Model for Quality

Five years ago, Florida hospitals were the target of criticism for poor health outcomes and high costs. While some individual hospitals were providing high quality care, on national benchmarks for quality and cost, our state as a whole ranked among the lowest.

It was not where we wanted to be.

And it was not where we would stay.

Though we came from a tradition of working as competitors, together, under the leadership of the 205 hospital and health system-member Florida Hospital Association (FHA), the state’s hospitals made a commitment to improve care, save lives and lower costs.

And we did it together, sharing our results and best practices with one another.

Our state’s hospitals faced difficult and perhaps unique challenges, heightened by the need to treat large numbers of elderly, uninsured and undocumented patients. The hospitals – knowing that because they would be judged as a state, they needed to work as a state – embraced a bold vision: to become a national model for high-quality, highly efficient health care.

Together, our hospitals have saved lives, helped patients return home sooner and stay home after their treatment, all while reducing excess costs.
We began the journey as individual organizations, ready to tackle such fundamental questions as:

- Would it be possible to improve quality and cost-effectiveness in a state as large and diverse as Florida, where hospitals vary widely in size, mission, culture and resources?
- What approaches could help Florida hospitals achieve real improvement?
- How would we work together, in a culture used to working as individuals?
- And how could Florida hospitals make meaningful gains sooner rather than later?

Now, five years later, we've seen that:

- It is possible to achieve statewide improvement, in a state as diverse as Florida.
- Focusing on improving quality in specific areas of care can lead to meaningful progress.
- Quality care can cost less.
- And collaboration among hospitals is the additive that accelerates quality gains.

The results have been significant. Together, our hospitals have saved lives, helped patients return home sooner and stay home after their treatment, all while reducing excess costs.

While Florida's hospitals have made progress, our journey continues. Energized by the progress made so far, we aim to continue working to provide the very best quality clinical care and patient experience possible within our own institutions. And we are committed to improving the quality of care at all hospitals through the power of collaboration.

We celebrate five years of quality improvement in Florida's hospitals. Having achieved this milestone, there is no going back.
Five years into our statewide campaign to improve the quality of care delivered by Florida hospitals, we’re seeing significant, tangible results.

- Florida patients are receiving better care.
  Participating hospitals saw fewer patients returning for readmission. More patients are healing without suffering surgical complications or bloodstream or urinary tract infections. More lives are being saved. And because patients are receiving better care, unnecessary costs are being avoided.

- Florida hospitals are focused on working together to improve quality of care like never before.
  It’s true: Success breeds success. Progress is energizing Florida’s hospitals to achieve even greater gains in quality and cost reduction. After joining in a series of collaboratives, each of which focused on an area of care with potentially significant impact on patient safety and quality outcomes, our state’s hospitals have demonstrated that they can deliver.
Trends are pointing in the right direction.
In just five years, Florida’s hospitals are seeing real results:

**Hospital Readmissions: Down 15 percent**
Over just two years at 107 Florida hospitals, the number of patients readmitted within 15 days of discharge declined 15 percent. What did that mean? More than 1,500 patients (and their families) were saved immeasurable misery, discomfort and disruption. And hospitals reduced costs by at least $25 million.

**Surgical Complications: Down 14.5 percent**
Over a 15 month period, the 67 hospitals participating in the Florida Surgical Care Initiative reduced total occurrences of post-operative complications by 14.5 percent. Hospitals saved 89 lives, prevented 165 complications and reduced costs by more than $6.67 million.

**Blood Stream Infections: Down 41 percent**
Blood stream infections declined dramatically within the 35 hospitals participating in a quality program on this critical patient safety focus. Over the two-year program, Florida hospitals recorded lower overall rates of blood stream infections than hospitals nationally. Hospitals in the collaborative saved 37 lives, prevented 302 blood stream infections and reduced costs by $15.9 million.

**Urinary Tract Infections: Down 37 percent**
Hospitals in Florida exceeded the rate at which hospitals nationally reduced urinary tract infections, recording a 37 percent decline during the 18-month initiative.

**Florida Firsts**
Today, there’s a growing list of “Florida Firsts” in hospital quality innovation:

- First to publicly report readmission rates by hospital.
- First to launch a statewide initiative to reduce the number of patients readmitted to a hospital within 15 days of discharge using an approach that looked at readmissions that were not planned or expected, or unrelated to the patient’s original procedure.
- Largest statewide initiative focused on reducing complications of surgery. The Florida Surgical Care Initiative (FSCI) has become a national model for quality improvement.
HOW FLORIDA’S HOSPITALS ARE GETTING BETTER – AND GETTING BETTER FASTER

Quality and patient safety were by no means new concerns. Florida hospitals and health systems have long undertaken their own individual efforts to improve patient outcomes.

But with the launch of FHA’s first collaborative in 2008, something fundamental changed: Hospitals no longer had to go it alone. We could learn from each other – and learn together.

And we did. Traditionally fierce competitors, we came together to share our successes and failures, tap the knowledge of experts, draw upon the latest evidence-based best practices and build a community of trust, communication and collaboration.

Interest in raising quality standards increased. And quality improvements at the hospitals accelerated. Collaboration with other hospitals meant not always having to reinvent the wheel.

Over five years, the state’s hospitals – members and non-members of the hospital association – participated in a number of initiatives. Each initiative focused on improving outcomes in a select area of care. And each was chosen for its potential to benefit many patients, make a favorable impact on costs and align with national health care quality improvement efforts.

The hospitals themselves decided if they would participate. And they tailored the resources, tools and information made available through the collaboratives to their own situations. Overall, participation – and enthusiasm – exceeded expectations of the FHA – and in some cases the hospitals themselves.
The FHA-led initiatives focused on two key areas in patient care:

**FEWER READMISSIONS: Helping Patients Heal Sooner, Return Home Quicker and Stay Home After Treatment**

*The Collaborative on Reducing Hospital Readmissions*

**Goal**
Understand readmission causes and adopt practices to significantly reduce the number of patients returning to the hospital after discharge, focusing on those most likely to be readmitted: patients experiencing heart failure, heart attack, pneumonia, hip replacement or cardiac bypass surgery. Readmission rates are a bellwether for successful coordination across the health care continuum – from hospitals to home to skilled nursing facility to the offices of primary care providers.

**About**
In 2008, Florida’s hospitals became the first in the nation to publicly report readmissions data by hospital. Through that process, for the first time Florida’s hospitals had access to actionable statewide readmissions data. Understanding avoidable readmissions drove the desire to work together to improve. In fact, data showed some patients may be readmitted to a different hospital for their follow-up care – further necessitating collaboration and underscoring the value of statewide data.

Launched in 2008, the two-year collaborative engaged 107 hospitals statewide, in partnership with Florida’s Agency for Health Care Administration, two leading health information systems providers and quality-improvement expert Convergence Consulting.

The collaborative provided in-depth information and extensive opportunities for hospitals to learn from experts, and from each other, about why readmissions occur, policy and payment issues affecting readmissions, and methods shown effective in reducing them.

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<td>›15 percent fewer readmissions</td>
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Results

- Overall, readmissions decreased 15 percent among collaborative participants, resulting in 1,500 fewer readmissions and $25 million in savings. All five key focus areas saw a decrease in readmissions.
- Hospitals made gains by:
  › Making sure patients and caregivers understood their medications – and other care instructions – at the time of discharge.
  › Following up with a phone call or visit to patients to make sure their questions were answered.
  › Establishing partnerships among all providers involved in a patient's care, in order to improve handoffs and sharing of information.
  › Discharging patients to settings that could provide the care they need.
  › Scheduling follow-up visits with their physicians.
  › Evaluating the patient's end-of-life care wishes.
- A process for reducing readmissions after hip replacement operations was developed in collaboration with the Florida Orthopedic Society.
- Hospitals and the state's large health plans worked together to understand health plan services designed to keep people out of the hospital, establish standard methodology for measuring readmissions and explore principles for payment alignment.

What’s next?

Work continues today through FHA's Partnership for Patients network – a nationwide project of the Centers for Medicare and Medicaid Services and coordinated through the American Hospital Association's Health Research & Educational Trust (HRET).

Through the HRET-FHA Hospital Engagement Networks, hospitals across Florida are working toward a goal of achieving a 20 percent reduction in readmissions by the end of December 2013. Resources are being devoted to creating hospital discharge advocates, providing medications to the patient prior to discharge and establishing strong partnerships with post-acute providers to ensure that patients are transitioned safely to the next level of care.

One specific project focuses on improving communication between hospitals and skilled nursing facilities – a critical link in reducing readmissions. A standard form is being developed to provide relevant medication and care information on patients transferring from a hospital to a skilled nursing facility. With clear information, facilities will be better able to care for newly arrived patients – and the need for re-hospitalization will be reduced.
ELIMINATING HARM: Preventing Complications and Saving Lives

Reducing Surgical Complications: The Florida Surgical Care Initiative (FSCI)

Goal
Save lives, reduce suffering and lower costs related to complications of surgery.

About
Developed in association with the American College of Surgeons, the two-year surgical care initiative involved 67 Florida hospitals, making it the largest statewide surgical quality collaborative in the nation. Florida Blue provided valuable financial support, and the initiative received endorsements from the National Patient Safety Foundation, the Florida Health Care Coalition, Mayo Clinic and the Institute for Healthcare Improvement.

FSCI encouraged broad participation and focused on high-impact areas:
• Surgical outcomes for elderly patients, a critical measure in a state with the nation’s largest percentage of elderly patients who undergo a high percentage of operations performed.
• Colorectal surgical outcomes, important because of the relatively higher complication rate of these procedures and the fact that the majority of hospitals perform them.
• Surgical site infections and urinary tract infections, vital to improving quality because their high incidence provides an excellent opportunity for faster, less complicated healing.
During the initiative’s initial two-year pilot, participating hospitals collected information on the patient’s condition prior to their operation, and how patients fared 30 days after undergoing a surgical procedure. Tracking outcomes after 30 days was important because half of all surgical complications have been shown to occur after patients leave the hospital.

To collect the information, the hospitals reviewed patient charts (not billing data that other quality programs use) and followed up directly with patients. Making calls required an investment in staff, but the payoff was richer information about post-surgical complications than could have been gleaned from claims or administrative data. An unintended benefit: patients expressed surprise and delight at the follow-up call from their hospital.

**Results**

- 89 lives saved
- 165 complications did not occur
- 14.5 percent decrease in total post-operative complications
- 15.8 percent fewer surgical site infections
- 35.7 percent lower risk of death

Hospitals saved more than $6.67 million in just 15 months by preventing these complications. That means, fewer health care dollars were needed to cover the costs of complications, helping contribute to lower costs.

**What’s next?**
The success of the two-year pilot led the American College of Surgeons to extend the initiative for at least three more years beginning in 2013. FHA has expanded the program to encourage all hospitals interested in improving surgical care to join, allowing a broader range of data collection options.
Improve Patient Safety: Patient Safety Organization of Florida

Goal
Reduce and prevent medical errors by adopting best practices and procedures.

About
The Patient Safety Organization of Florida (PSOFlorida) is jointly managed by the FHA and the South Florida Hospital & Healthcare Association. The two organizations teamed with the ECRI Institute, an independent, nonprofit organization that researches the best approaches to improving safety, quality and cost-effectiveness. Thirty hospitals, health systems and physician groups participate in PSOFlorida. Many other Florida hospitals are part of other patient safety organizations.

PSOFlorida provides an environment where hospitals and physicians may submit data on medical errors and mistakes, learn evidence-based best practices drawn from state and national patient safety data and share insights with peers. Learning and discussion is facilitated through webinars, protected websites, newsletters and research.

Results
Hospitals have reported that greater sharing and review of past events are helping them reduce the likelihood of future events. That means less chance of harm for patients as hospitals strive to eliminate preventable medical errors.

What’s next?
PSOFlorida is continuing its focus on helping hospitals reduce preventable errors. Through ongoing sharing and case studies, hospitals are able to implement steps to better prevent errors. As hospitals feel more comfortable sharing with one another, the ability to improve increases.
Stopping HAIs: Programs to Improve Culture, Eliminate Infections

Goal
Reduce the occurrence of two frequent hospital-acquired infections – urinary tract and bloodstream – while improving hospital culture and increasing adoption of safety practices. A related initiative, the Florida Perinatal Quality Collaborative, targeted reductions in bloodstream infections in infants in neo-natal intensive care units (NICU).

About
Launched in 2009, the On the Cusp initiative engaged 69 units in 35 hospitals in the Central Line-Associated Bloodstream Infection (CLABSI) program and 21 units in ten hospitals in the Catheter-Associated Urinary Tract Infection (CAUTI) program. Sixteen NICUs participated in the Perinatal Quality Collaborative. FHA partnered with HRET to coordinate Florida hospitals’ participation.

Florida was one of the first states in the nation to participate in the program. A major emphasis was on building a quality-focused hospital culture in which all members of the patient care team feel they may speak up if they see or suspect a safety concern.

Through the initiatives, participants trained their staffs on the science of safety, measured the culture for patient safety in their own organizations, and worked to improve that culture so that all staff members are focused on preventing patient harm.

Results
Over 24 months, participating Florida hospitals recorded:

- 41 percent fewer bloodstream infections, which led to 37 lives saved and 302 infections prevented.
- 37 percent fewer urinary tract infections, better than the national reduction of 34 percent.
- Overall, the collaboratives saved about $16 million.

What’s next?
Efforts to reduce CLABSI and CAUTI are ongoing under the FHA’s Partnership for Patients Hospital Engagement Network.
LOOKING AHEAD: Reducing Patient Harm through the Partnership for Patients Hospital Engagement Network

Goals
Reduce patient harm by 40 percent and hospital readmissions by 20 percent in three years. Reduce early elective deliveries – scheduled births before 39 weeks – to fewer than 3 percent percent of all Florida births by 2013.

About
FHAs successful collaboratives now continue under our Partnership for Patients Hospital Engagement Network in partnership with HRET. Through the national initiative, our hospitals continue to build upon gains made through earlier collaboratives to reduce readmissions and medical complications, with additional resources and expertise to accelerate learning and improvement. Currently, 74 hospitals from across the state are part of FHAs network. (Other Florida hospitals belong to other Hospital Engagement Networks.)

Hospitals in 31 states are able to share best practices and participate in joint educational opportunities through HRET; for Florida's hospitals the effort means already-established statewide collaboration is now expanded nationally. In fact, Florida's hospitals have been frequently called upon to share their learnings with other states.

The FHA network provides training and technical assistance in 10 areas of potential improvement in addition to early elective deliveries. Importantly, the program has infused Florida's collaboratives with access to additional resources and national expertise. Participating hospitals may choose to focus on two or more of the following areas:

- Adverse drug events
- Central line-associated bloodstream infections (CLABSI)
- Catheter-associated urinary tract infection (CAUTI)
- Injury from falls and immobility
- Pressure ulcers
- Obstetrical adverse events
- Surgical site infections
- Venous thromboembolism
- Ventilator-associated pneumonia (blood clot)
- Readmissions

In return, participating hospitals submit data related to their focus areas to the HEN database. This data is collected, analyzed and returned to the hospitals as insights into ways to improve quality of care.

Results:
Florida met the initial goal set by HRET: 60 percent of the participating HEN hospitals reduced instances of harm by 30 percent in six focus areas.
KEY DRIVERS BEHIND OUR QUALITY IMPROVEMENTS

After five years of focus on quality, what lessons have been learned? What factors are needed to promote and accelerate quality improvements? We've identified four key lessons.

Lessons Learned: Florida’s Five-Year Quality Journey

▶ Collaboration is the fuel for fast, efficient quality progress.
▶ Culture is integral to improving quality.
▶ Data are critical to understanding the problem, tracking progress.
▶ Partnerships extend quality efforts and expand learning.

Collaboration

Collaboration, among hospitals, within hospitals and across disciplines, is the fuel for fast, efficient quality progress.

“When hospitals share and learn from each other, we all benefit not just in knowledge but from the mutual encouragement and positive competition that result from collaboration. We could never make the progress individually that we’ve made together.”

Hugh Greene, CEO, Baptist Health- Jacksonville

“Early on we heard success stories from other hospitals who were seeing significant reductions in hospital-acquired conditions. That got us excited to be involved and take those learnings back to our own hospital. Now, we hope other Florida hospitals will be able to model themselves after many of our successes. At the same time, we continue to learn from our colleagues at hospitals across the state.”

Jamal Hakim, M.D., chief of quality and transformation, Orlando Health

“I believe we’ve made meaningful progress on our quality journey. People now recognize that quality – and being transparent about quality – is important. They also recognize the value of working collectively, that sharing information allows us to better learn and improve.”

Mark O’Bryant, CEO, Tallahassee Memorial Health Care

“Our work on eliminating central line-associated bloodstream infections brought the team together. In the past, physicians may have tried to address the problem independently. And nurses may have tried to, too. But it was the hospital’s concerted focus on eliminating central line infections that really brought to light the need for interdisciplinary collaboration.”

Randy Harmatz, chief quality officer and senior vice president, University of Florida Health
Culture

Culture is integral to improving quality. It’s been proven that when there is communication and teamwork, patient safety and quality of care improve.

“When it comes to quality, Florida hospitals shoot for the best, knowing that our best can always be better. That’s why quality improvement is ingrained in our culture. While we’ve made significant improvements in the quality of our care in recent years, we continue to strive to make that care even better.”

Charles Krivenko, M.D., chief medical officer & chief patient safety officer, Lee Memorial Health System

“By doing things like eliminating infections and readmissions, we not only provide better quality of care, we also help drive down costs. High quality and organizational effectiveness are not mutually exclusive; they go together. We need to make this idea part of our culture.”

Bob Brigham, CEO, Mayo Clinic

Data and Measurement

Data are critical to understanding the problem, tracking progress and justifying investment. When people are measured and can see how they’re performing, improvement almost always follows. Not just any data will do. Data must be robust enough to capture patient factors and hospitals must have the ability to “drill down” to truly understand the reasons problems are occurring. In fact, many of Florida’s results would have been difficult to achieve without robust data.

“Knowledge is power, so having the information and data that’s available through our various collaborations gives us great power to improve patient safety and quality. When we combine this knowledge with a commitment to quality and a culture that is safety-focused, hospitals – and communities of hospitals – succeed in improving patient outcomes.”

Steven D. Sonenreich, CEO, Mount Sinai Medical Center

“The availability of electronic patient data is enabling us to quantify quality of care in ways we couldn’t before – and to better understand the quality/cost ratio or the value of the care we provide. What the data tell us is that we have more opportunities to improve – and that’s what we have to do.”

Allen Weiss, M.D., CEO, NCH Healthcare System

Partnerships

Partnerships extend quality efforts and expand learning, enabling more holistic – and more effective – approaches.

“Given the complexity of health care, it’s not enough for providers to improve on their own. That’s why Florida’s hospitals are working together, and bringing in national resources, too. Florida's hospitals have partnered with American Hospital Association’s Health Research and Educational Trust, the American College of Surgeons, Florida Blue and other experts who have helped us build our novel quality improvement initiatives.”

Gwen MacKenzie, CEO, Sarasota Memorial Health Care System
Onward! Upward!

Health reform will create major new changes for hospitals in Florida and across the country. New reimbursement formulas being adopted by both government and private payers will increasingly require a shift from a fee-for-service to a pay-for-performance model, aimed at encouraging accountability for getting and keeping patients well. As these changes unfold, quality and patient safety will continue to be our primary focus.

Over the past half-decade, Florida’s hospitals have made notable progress in improving quality of care in specific areas. We have created a solid platform, built on the power of collaboration, to achieve further milestones. The connections made will help us build on our improvements in the years ahead.

Work continues to eliminate patient harm, reduce readmissions and improve surgical care. Hospitals and physicians continue to study and learn from medical errors. And other quality initiatives based on the collaborative model are under consideration.

With the journey well underway, it is now time to build momentum. The focus needs to move from improving in specific areas to embedding a relentless pursuit of quality in the fiber of our hospital culture. No longer can a single initiative or a lone “champion” be expected to carry the quality cause; instead, everything a hospital does must focus on delivering better, safer care for patients.

Florida’s hospitals began our quest with a clear goal: to provide the highest quality and most affordable care for our patients by working together across the state. Five years into our journey, we remain committed to doing just that.
## Hospitals Participating in FHA Quality Initiatives:

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<td>All Children’s Hospital</td>
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Lawnwood Regional Medical Center & Heart Institute
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Leesburg Regional Medical Center
LifeStream Behavioral Center, Inc.
Mariners Hospital
Martin Hospital South
Martin Medical Center
Mayo Clinic Florida
Mease Countryside Hospital
Mease Dunedin Hospital
Memorial Hospital Miramar
Memorial Hospital of Tampa
Memorial Hospital Pembroke
Memorial Hospital West
Memorial Regional Hospital
Memorial Regional Hospital South
Miami Children’s Hospital
Morton Plant Hospital
Morton Plant North Bay Hospital
Mount Sinai Medical Center
Munroe Regional Medical Center
NCH Downtown Naples Hospital
NCH North Naples Hospital
North Okaloosa Medical Center
North Shore Medical Center
North Shore Medical Center FMC Campus
Northwest Florida Community Hospital
Northwest Medical Center
Orlando Regional Medical Center
Palm Bay Hospital
Palm Beach Gardens Medical Center
Palmetto General Hospital
Palms of Pasadena Hospital
Palms West Hospital
Park Royal Hospital
Parrish Medical Center
Plantation General Hospital
Putnam Community Medical Center
Raulerson Hospital
Regency Center for Women & Infants
Sacred Heart Hospital of Pensacola
Sacred Heart Hospital on the Emerald Coast
Sacred Heart Hospital on the Gulf
Sarasota Memorial Health Care System
Shands Lake Shore Regional Medical Center
Shands Live Oak Regional Medical Center
Shands Starke Regional Medical Center
South Florida Baptist Hospital
South Lake Hospital
South Miami Hospital
South Seminole Hospital
St. Anthony’s Hospital
St. Joseph’s Children’s Hospital
St. Joseph’s Hospital, Inc.
St. Joseph’s Hospital-North
St. Joseph’s Women’s Hospital
St. Lucie Medical Center
St. Mary’s Medical Center
St. Vincent’s Medical Center Riverside
St. Vincent’s Medical Center Southside
Tallahassee Memorial Hospital
Tampa General Hospital
The Villages Regional Hospital
Town & Country Hospital
University of Florida Health Jacksonville
University of Florida Health Shands Hospital
University Hospital & Medical Center
University of Miami Hospital
University of Miami Hospital and Clinics
University Pavilion Hospital
Venice Regional Medical Center
Viera Hospital
West Boca Medical Center, Inc.
West Palm Hospital
Westchester General Hospital
Westside Regional Medical Center
Winnie Palmer Hospital for Women & Babies
Winter Haven Hospital, Inc.
Wolfson Children’s Hospital
Wuesthoff Medical Center-Melbourne
Wuesthoff Medical Center-Rockledge