A bill to be entitled

An act relating to health care; amending s.

395.7015, F.S.; providing a credit against the assessment on certain health care entities for freestanding radiation therapy centers treating medically indigent or Medicaid patients for cancer; providing for calculation of the value of the credit; providing an effective date.

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

Section 1. Subsection (2) of section 395.7015, Florida Statutes, is amended to read:

395.7015 Annual assessment on health care entities.--

- (2) There is hereby imposed an annual assessment against certain health care entities as described in this section:
- (a) The assessment shall be equal to 1.5 percent of the annual net operating revenues of health care entities.
- 1. The first assessment shall be due on April 30, 1992, and the second on April 30, 1993, and each shall be based on the appropriate reports filed with the agency no later than March 31 of the year the assessment is due. By January 1, 1992, the health care entity shall make a one-time election to base the assessments on net operating revenue received in the health care entity's latest fiscal year ending on or before December 31, 1991, or December 31, 1992, respectively, or in the 12-month period ending March 31 of the year the assessment is due. The assessment shall be payable to and collected by the agency.

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- 2. Beginning July 1, 1993, assessments shall be based on annual net operating revenues for the entity's most recently completed fiscal year as provided in subsection (3).
- (b) For the purpose of this section, "health care
 entities" include the following:
- 1. Ambulatory surgical centers licensed under s. 395.003.
- Clinical laboratories licensed under s. 483.091, excluding any hospital laboratory defined under s. 483.041(5), any clinical laboratory operated by the state or a political subdivision of the state, any clinical laboratory which qualifies as an exempt organization under s. 501(c)(3) of the Internal Revenue Code of 1986, as amended, and which receives 70 percent or more of its gross revenues from services to charity patients or Medicaid patients, and any blood, plasma, or tissue bank procuring, storing, or distributing blood, plasma, or tissue either for future manufacture or research or distributed on a nonprofit basis, and further excluding any clinical laboratory which is wholly owned and operated by 6 or fewer physicians who are licensed pursuant to chapter 458 or chapter 459 and who practice in the same group practice, and at which no clinical laboratory work is performed for patients referred by any health care provider who is not a member of the same group.
- 3. Freestanding radiation therapy centers providing treatment through the use of radiation therapy machines that are registered under s. 404.22 and rules 10D-91.902, 10D-91.903, and 10D-91.904 of the Florida Administrative Code. However, a freestanding radiation therapy center that treats cancer patients who are medically indigent and accepts Medicaid patients for cancer treatment shall be given a credit

against the amount of the assessment due under this section.

The value of this credit shall be an amount equal to the total dollar value of the uncompensated care given by the radiation therapy center in the most recently completed fiscal year.

The value of the uncompensated care shall be calculated using Medicare reimbursement rates.

4. Diagnostic-imaging centers that are freestanding outpatient facilities that provide specialized services for the identification or determination of a disease through examination and also provide sophisticated radiological services, and in which services are rendered by a physician licensed by the Board of Medicine under s. 458.311, s. 458.313, or s. 458.317, or by an osteopathic physician licensed by the Board of Osteopathic Medicine under s. 459.006, s. 459.007, or s. 459.0075. For purposes of this paragraph, "sophisticated radiological services" means the following: magnetic resonance imaging; nuclear medicine; angiography; arteriography; computed tomography; positron emission tomography; digital vascular imaging; bronchography; lymphangiography; splenography; ultrasound, excluding ultrasound providers that are part of a private physician's office practice or when ultrasound is provided by two or more physicians licensed under chapter 458 or chapter 459 who are members of the same professional association and who practice in the same medical specialties; and such other sophisticated radiological services, excluding mammography, as adopted in rule by the board.

Section 2. This act shall take effect upon becoming a

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********** HOUSE SUMMARY Provides a credit against the assessment on certain health care entities for freestanding radiation therapy centers that treat medically indigent or Medicaid patients for cancer. Provides that the amount of the credit is the total dollar value of uncompensated care for the fiscal year, calculated using Medicare reimbursement rates.