

SENATE STAFF ANALYSIS AND ECONOMIC IMPACT STATEMENT

(This document is based only on the provisions contained in the legislation as of the latest date listed below.)

BILL: SB 882

SPONSOR: Senator Sullivan

SUBJECT: Health Care Contracts

DATE: April 19, 1999 REVISED: _____

	ANALYST	STAFF DIRECTOR	REFERENCE	ACTION
1.	<u>Emrich</u>	<u>Deffenbaugh</u>	<u>BI</u>	<u>Favorable</u>
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____

I. Summary:

This bill requires any health insurance policy that provides for the payment of services that are performed by a physician licensed under chapters 458 or 459, which services may be legally performed by advanced registered nurse practitioner's (ARNPs), shall be construed as providing for payment of such services if performed by a licensed ARNP. Services of an ARNP must be performed in accordance with protocols and under physician medical supervision or on-site medical direction as required by ss. 464.012 and 395.0191, F.S.

This bill amends section 627.419 of the Florida Statutes.

II. Present Situation:

Currently, there are more than 7,300 advanced registered nurse practitioners (ARNPs) licensed to practice in Florida. ARNPs are defined under s. 464.003(6), F.S., as persons who practice professional nursing and are certified in advanced or specialized nursing practices. Licensed by the Board of Nursing, ARNPs must satisfy certain prescribed educational and training requirements to be certified in one of three categories: nurse midwives, nurse anesthetists, and nurse practitioners. ARNPs must practice under the supervision of a medical doctor, osteopathic physician or dentist and in accordance with a written protocol that delineates their functions and responsibilities.

Health insurance policies may limit the type of providers eligible for payment. However, there are provisions currently in law that require health insurance policies to reimburse specific providers for such services that are within the scope of the license to the extent the services are otherwise covered under the insurance policy. For example, legislation was enacted 2 years ago (s. 627.419(6), F.S.) to require payment to physician assistants under health insurance policies, health care services plans, or other contracts, for services within the scope of a physician assistant's license, where the policy would reimburse a physician for the service and the physician assistant performed the service instead of the physician.

Currently, ARNPs receive direct reimbursement under Medicaid, Medicare, and many private insurance plans. However, the problem which occurs presently is that although ARNPs may legally provide a broad range of health care services under a doctor's supervision, some health care policies do not provide payment for the services provided by ARNPs, especially where an ARNP bills for her or his services separately from the supervising physician.

III. Effect of Proposed Changes:

Section 1. Creates s. 627.419(9), F.S., to require that any health insurance policy that provides for the payment of services that are performed by a physician licensed as a doctor of medicine under chapter 458 or as a doctor of osteopathic medicine licensed under chapter 459, which services may be legally performed by advanced registered nurse practitioner's (ARNPs), shall be construed as providing for payment of such services if performed by a licensed ARNP. Services of an ARNP must be performed in accordance with protocols and under physician medical supervision or on-site medical direction as required by ss. 464.012 and 395.0191, F.S. Section 464.012, F.S., describes the specific protocol that ARNPs must perform while s. 395.0191, F.S., describes procedures for staff membership and clinical privileges relating to hospitals and ambulatory surgical centers.

Section 2. Provides that the bill shall take effect upon becoming a law.

IV. Constitutional Issues:

A. Municipality/County Mandates Restrictions:

None.

B. Public Records/Open Meetings Issues:

None.

C. Trust Funds Restrictions:

None.

V. Economic Impact and Fiscal Note:

A. Tax/Fee Issues:

None.

B. Private Sector Impact:

This bill does not expand the health insurance contract to services not currently covered in current policies. Thus, no rate or cost increase is anticipated. There may be a decrease in health care costs, since the cost of ARNP services is generally lower than that of physicians. The bill may minimize delays or disputes over payment for services rendered by ARNPs.

C. Government Sector Impact:

None.

VI. Technical Deficiencies:

None.

VII. Related Issues:

None.

VIII. Amendments:

None.

This Senate staff analysis does not reflect the intent or official position of the bill's sponsor or the Florida Senate.
