

Bill No. CS for SB 1028

Amendment No. \_\_\_\_

	<u>Senate</u>	CHAMBER ACTION	<u>House</u>
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11	Senators Campbell and Cowin moved the following amendment to		
12	amendment (540324):		
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14	<b>Senate Amendment (with title amendment)</b>		
15	On page 63, between lines 21 and 22,		
16			
17	insert:		
18	Section 41. Subsections (4) through (10) of section		
19	641.51, Florida Statutes, are redesignated as subsections (5)		
20	through (11), respectively, and a new subsection (4) is added		
21	to said section to read:		
22	641.51 Quality assurance program; second medical		
23	opinion requirement.--		
24	<u>(4) The organization shall ensure that only a</u>		
25	<u>physician licensed under chapter 458 or chapter 459 or an</u>		
26	<u>allopathic or osteopathic physician with an active,</u>		
27	<u>unencumbered license in another state with similar licensing</u>		
28	<u>requirements may render an adverse determination regarding a</u>		
29	<u>service provided by a physician licensed in this state. The</u>		
30	<u>organization shall submit to the treating provider and the</u>		
31	<u>subscriber written notification regarding the organization's</u>		

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1 adverse determination within 2 working days after the  
 2 subscriber or provider is notified of the adverse  
 3 determination. The written notification must include the  
 4 utilization review criteria or benefits provisions used in the  
 5 adverse determination, identify the physician who rendered the  
 6 adverse determination, and be signed by an authorized  
 7 representative of the organization or the physician who  
 8 rendered the adverse determination. The organization must  
 9 include with the notification of an adverse determination  
 10 information concerning the appeal process for adverse  
 11 determinations.

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13 (Redesignate subsequent sections.)

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15

16 ===== T I T L E A M E N D M E N T =====

17 And the title is amended as follows:

18 On page 68, line 8, after the semicolon

19

20 insert:

21 amending s. 641.51, F.S., relating to quality  
 22 assurance program requirements for certain  
 23 managed care organizations; allowing the  
 24 rendering of adverse determinations by  
 25 physicians licensed in Florida or states with  
 26 similar requirements; requiring the submission  
 27 of facts and documentation pertaining to  
 28 rendered adverse determinations; providing  
 29 timeframe for organizations to submit facts and  
 30 documentation to providers and subscribers in  
 31 writing; requiring an authorized representative

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