Bill No. HB 1867, 2nd Eng. Amendment No. \_\_\_\_ Barcode 363042 CHAMBER ACTION Senate House 1 2 3 4 5 6 7 8 9 10 Senators Sanderson and Wasserman Schultz moved the following 11 12 amendment: 13 14 Senate Amendment (with title amendment) On page 319, between lines 19 and 20, 15 16 17 insert: 18 Section 154. Paragraph (o) of subsection (3) of section 456.053, Florida Statutes, is amended to read: 19 20 456.053 Financial arrangements between referring 21 health care providers and providers of health care services.--22 (3) DEFINITIONS.--For the purpose of this section, the 23 word, phrase, or term: "Referral" means any referral of a patient by a 24 (0) 25 health care provider for health care services, including, without limitation: 26 27 1. The forwarding of a patient by a health care provider to another health care provider or to an entity which 28 29 provides or supplies designated health services or any other 30 health care item or service; or 2. The request or establishment of a plan of care by a 31 1 h1867c-31b5t 8:36 AM 05/03/01

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health care provider, which includes the provision of 1 designated health services or other health care item or 2 service. 3 4 3. The following orders, recommendations, or plans of 5 care shall not constitute a referral by a health care 6 provider: 7 By a radiologist for diagnostic-imaging services. a. 8 b. By a physician specializing in the provision of 9 radiation therapy services for such services. 10 c. By a medical oncologist for drugs and solutions to be prepared and administered intravenously to such 11 12 oncologist's patient, as well as for the supplies and 13 equipment used in connection therewith to treat such patient for cancer and the complications thereof. 14 15 d. By a cardiologist for cardiac catheterization 16 services. 17 e. By a pathologist for diagnostic clinical laboratory tests and pathological examination services, if furnished by 18 or under the supervision of such pathologist pursuant to a 19 20 consultation requested by another physician. 21 By a health care provider who is the sole provider f. or member of a group practice for designated health services 22 or other health care items or services that are prescribed or 23 24 provided solely for such referring health care provider's or 25 group practice's own patients, and that are provided or performed by or under the direct supervision of such referring 26 27 health care provider or group practice; provided, however, that effective July 1, 1999, a physician licensed pursuant to 28 chapter 458, chapter 459, chapter 460, or chapter 461 may 29 30 refer a patient to a sole provider or group practice for 31 diagnostic imaging services, excluding radiation therapy

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services, for which the sole provider or group practice billed 1 2 both the technical and the professional fee for or on behalf 3 of the patient, if the referring physician has no investment 4 interest in the practice. The diagnostic imaging service referred to a group practice or sole provider must be a 5 diagnostic imaging service normally provided within the scope 6 7 of practice to the patients of the group practice or sole provider. The group practice or sole provider may accept no 8 more that 15 percent of their patients receiving diagnostic 9 10 imaging services from outside referrals, excluding radiation 11 therapy services. 12 g. By a health care provider for services provided by an ambulatory surgical center licensed under chapter 395. 13 14 h. By a health care provider for diagnostic clinical 15 laboratory services where such services are directly related 16 to renal dialysis. 17 h.i. By a urologist for lithotripsy services. i.<del>j.</del> By a dentist for dental services performed by an 18 employee of or health care provider who is an independent 19 20 contractor with the dentist or group practice of which the dentist is a member. 21 22 j.k. By a physician for infusion therapy services to a patient of that physician or a member of that physician's 23 24 group practice. 25 k.1. By a nephrologist for renal dialysis services and supplies, except laboratory services. 26 27 28 (Redesignate subsequent sections.) 29 30 31

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And the title is amended as follows: On page 14, line 14, following the semicolon insert: amending s. 456.053, F.S.; redefining the term "referral" with respect to financial arrangements between health care providers and service providers; 

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