

Amendment No. ____ (for drafter's use only)

	<u>Senate</u>	CHAMBER ACTION	<u>House</u>
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ORIGINAL STAMP BELOW

Representative(s) Ross offered the following:

Amendment to Amendment (833993) (with title amendment)

On page 14, lines 3-11

remove: all of said lines

and insert:

Section 7. Subsection (12) and paragraph (b) of subsection (14) of section 440.13, Florida Statutes, are amended to read:

(12) CREATION OF THREE-MEMBER PANEL; GUIDES OF MAXIMUM REIMBURSEMENT ALLOWANCES.--

(a) A three-member panel is created, consisting of the Insurance Commissioner, or the Insurance Commissioner's designee, and two members to be appointed by the Governor, subject to confirmation by the Senate, one member who, on account of present or previous vocation, employment, or affiliation, shall be classified as a representative of employers, the other member who, on account of previous vocation, employment, or affiliation, shall be classified as a representative of employees. The panel shall determine

1 statewide schedules of maximum reimbursement allowances for
2 medically necessary treatment, care, and attendance provided
3 by physicians, hospitals, ambulatory surgical centers,
4 work-hardening programs, pain programs, and durable medical
5 equipment. The maximum reimbursement allowances for inpatient
6 hospital care shall be based on a schedule of per diem rates,
7 to be approved by the three-member panel no later than March
8 1, 1994, to be used in conjunction with a precertification
9 manual as determined by the division. All compensable charges
10 for hospital outpatient care shall be reimbursed at 75 percent
11 of usual and customary charges. Until the three-member panel
12 approves a schedule of per diem rates for inpatient hospital
13 care and it becomes effective, all compensable charges for
14 hospital inpatient care must be reimbursed at 75 percent of
15 their usual and customary charges. Annually, the three-member
16 panel shall adopt schedules of maximum reimbursement
17 allowances for physicians, hospital inpatient care, hospital
18 outpatient care, ambulatory surgical centers, work-hardening
19 programs, and pain programs. However, the maximum percentage
20 of increase in the individual reimbursement allowance may not
21 exceed the percentage of increase in the Consumer Price Index
22 for the previous year. An individual physician, hospital,
23 ambulatory surgical center, pain program, or work-hardening
24 program shall be reimbursed either the usual and customary
25 charge for treatment, care, and attendance, the agreed-upon
26 contract price, or the maximum reimbursement allowance in the
27 appropriate schedule, whichever is less.

28 (b) As to reimbursement for a prescription medication,
29 the reimbursement amount for a prescription shall be the
30 average wholesale price times 1.2 plus \$4.18 for the
31 dispensing fee, except where the carrier has contracted for a

1 lower amount. Fees for pharmaceuticals and pharmaceutical
2 services shall be reimbursable at the applicable fee schedule
3 amount. Where the employer or carrier has contracted for such
4 services and the employee elects to obtain them through a
5 provider not a party to the contract, the carrier shall
6 reimburse at the schedule, negotiated, or contract price,
7 whichever is lower.

8 (c) Reimbursement for all fees and other charges for
9 such treatment, care, and attendance, including treatment,
10 care, and attendance provided by any hospital or other health
11 care provider, ambulatory surgical center, work-hardening
12 program, or pain program, must not exceed the amounts provided
13 by the uniform schedule of maximum reimbursement allowances as
14 determined by the panel or as otherwise provided in this
15 section. This subsection also applies to independent medical
16 examinations performed by health care providers under this
17 chapter. Until the three-member panel approves a uniform
18 schedule of maximum reimbursement allowances and it becomes
19 effective, all compensable charges for treatment, care, and
20 attendance provided by physicians, ambulatory surgical
21 centers, work-hardening programs, or pain programs shall be
22 reimbursed at the lowest maximum reimbursement allowance
23 across all 1992 schedules of maximum reimbursement allowances
24 for the services provided regardless of the place of service.
25 In determining the uniform schedule, the panel shall first
26 approve the data which it finds representative of prevailing
27 charges in the state for similar treatment, care, and
28 attendance of injured persons. Each health care provider,
29 health care facility, ambulatory surgical center,
30 work-hardening program, or pain program receiving workers'
31 compensation payments shall maintain records verifying their

1 usual charges. In establishing the uniform schedule of maximum
2 reimbursement allowances, the panel must consider:

3 1. The levels of reimbursement for similar treatment,
4 care, and attendance made by other health care programs or
5 third-party providers;

6 2. The impact upon cost to employers for providing a
7 level of reimbursement for treatment, care, and attendance
8 which will ensure the availability of treatment, care, and
9 attendance required by injured workers;

10 3. The financial impact of the reimbursement
11 allowances upon health care providers and health care
12 facilities, including trauma centers as defined in s.
13 395.4001, and its effect upon their ability to make available
14 to injured workers such medically necessary remedial
15 treatment, care, and attendance. The uniform schedule of
16 maximum reimbursement allowances must be reasonable, must
17 promote health care cost containment and efficiency with
18 respect to the workers' compensation health care delivery
19 system, and must be sufficient to ensure availability of such
20 medically necessary remedial treatment, care, and attendance
21 to injured workers; and

22 4. The most recent average maximum allowable rate of
23 increase for hospitals determined by the Health Care Board
24 under chapter 408.

25 (d) In addition to establishing the uniform schedule
26 of maximum reimbursement allowances, the panel shall:

27 1. Take testimony, receive records, and collect data
28 to evaluate the adequacy of the workers' compensation fee
29 schedule, nationally recognized fee schedules and alternative
30 methods of reimbursement to certified health care providers
31 and health care facilities for inpatient and outpatient

1 treatment and care.

2 2. Survey certified health care providers and health
3 care facilities to determine the availability and
4 accessibility of workers' compensation health care delivery
5 systems for injured workers.

6 3. Survey carriers to determine the estimated impact
7 on carrier costs and workers' compensation premium rates by
8 implementing changes to the carrier reimbursement schedule or
9 implementing alternative reimbursement methods.

10 4. Submit recommendations on or before January 1,
11 2003, and biennially thereafter, to the President of the
12 Senate and the Speaker of the House of Representatives on
13 methods to improve the workers' compensation health care
14 delivery system.

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16 The division shall provide data to the panel, including but
17 not limited to utilization trends in the workers' compensation
18 health care delivery system. The division shall provide the
19 panel with an annual report regarding the resolution of
20 medical reimbursement disputes and any actions pursuant to s.
21 440.13(8). The division shall provide administrative support
22 and service to the panel to the extent requested by the panel.

23 (14) PAYMENT OF MEDICAL FEES.--

24 (b) Fees charged for remedial treatment, care, and
25 attendance, except for independent medical examinations, may
26 not exceed the applicable fee schedules adopted under this
27 chapter.

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

31 And the title is amended as follows:

1 On page 33,line 23 of the amendment
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3 after the semicolon, insert:
4 providing for responsibilities of the
5 three-member panel; requiring provision of data
6 and support services by the division;
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