## Bill No. CS for SB 2112

## Barcode 941016

## CHAMBER ACTION

	Senate House
1	Comm: RCS
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11	The Committee on Criminal Justice (Smith) recommended the
12	following amendment:
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14	Senate Amendment (with title amendment)
15	Delete everything after the enacting clause
16	
17	and insert:
18	Section 1. Section 400.990, Florida Statutes, is
19	amended to read:
20	400.990 Short title; legislative findings
21	(1) This part, consisting of <u>ss. 400.990-400.996</u> <del>ss.</del>
22	400.990-400.995, may be cited as the "Health Care Clinic Act."
23	(2) The Legislature finds that the regulation of
24	health care clinics must be strengthened to prevent
25	significant cost and harm to consumers.
26	(3) The Legislature further finds the additional
27	regulation of specialty health care clinics is necessary to
28	prevent significant fraudulent practices in the provision of
29	infusion therapy services in this state.
30	(4) The purpose of this part is to provide for the
31	licensure, establishment, and enforcement of basic standards
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for health care clinics and to provide administrative oversight by the Agency for Health Care Administration.

Section 2. Subsection (4) of section 400.9905, Florida Statutes, is amended and subsections (8), (9), and (10) are added to that section, to read:

400.9905 Definitions.--

- (4) "Clinic" means an entity at which health care services are provided to individuals and which tenders charges for reimbursement for such services, including a mobile clinic and a portable equipment provider. For purposes of this part, the term does not include and the licensure requirements of this part do not apply to:
- (a) Entities licensed or registered by the state under chapter 395; or entities licensed or registered by the state and providing only health care services within the scope of services authorized under their respective licenses granted under ss. 383.30-383.335, chapter 390, chapter 394, chapter 397, this chapter except part XIII, chapter 463, chapter 465, chapter 466, chapter 478, part I of chapter 483, chapter 484, or chapter 651; end-stage renal disease providers authorized under 42 C.F.R. part 405, subpart U; or providers certified under 42 C.F.R. part 485, subpart B or subpart H; or any entity that provides neonatal or pediatric hospital-based health care services by licensed practitioners solely within a hospital licensed under chapter 395.
- (b) Entities that own, directly or indirectly, entities licensed or registered by the state pursuant to chapter 395; or entities that own, directly or indirectly, entities licensed or registered by the state and providing only health care services within the scope of services authorized pursuant to their respective licenses granted under 2 s2112c1d-cj14-b01

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ss. 383.30-383.335, chapter 390, chapter 394, chapter 397,
this chapter except part XIII, chapter 463, chapter 465,
chapter 466, chapter 478, part I of chapter 483, chapter 484,
chapter 651; end-stage renal disease providers authorized
under 42 C.F.R. part 405, subpart U; or providers certified
under 42 C.F.R. part 485, subpart B or subpart H; or any
entity that provides neonatal or pediatric hospital-based
health care services by licensed practitioners solely within a
hospital licensed under chapter 395.

- (c) Entities that are owned, directly or indirectly, by an entity licensed or registered by the state pursuant to chapter 395; or entities that are owned, directly or indirectly, by an entity licensed or registered by the state and providing only health care services within the scope of services authorized pursuant to their respective licenses granted under ss. 383.30-383.335, chapter 390, chapter 394, chapter 397, this chapter except part XIII, chapter 463, chapter 465, chapter 466, chapter 478, part I of chapter 483, chapter 484, or chapter 651; end-stage renal disease providers authorized under 42 C.F.R. part 405, subpart U; or providers certified under 42 C.F.R. part 485, subpart B or subpart H; or any entity that provides neonatal or pediatric hospital-based health care services by licensed practitioners solely within a hospital under chapter 395.
- (d) Entities that are under common ownership, directly or indirectly, with an entity licensed or registered by the state pursuant to chapter 395; or entities that are under common ownership, directly or indirectly, with an entity licensed or registered by the state and providing only health care services within the scope of services authorized pursuant to their respective licenses granted under ss. 383.30-383.335, 3 10:54 AM 04/19/06 2112cld-cj14-b01

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part I of chapter 483, chapter 484, or chapter 651; end-stage
renal disease providers authorized under 42 C.F.R. part 405,
subpart U; or providers certified under 42 C.F.R. part 485,
subpart B or subpart H; or any entity that provides neonatal
or pediatric hospital-based health care services by licensed
practitioners solely within a hospital licensed under chapter
395.

- (e) An entity that is exempt from federal taxation under 26 U.S.C. s. 501(c)(3) or s. 501(c)(4), any community college or university clinic, and any entity owned or operated by the federal or state government, including agencies, subdivisions, or municipalities thereof.
- (f) A sole proprietorship, group practice, partnership, or corporation, or other legal entity that provides health care services by <u>licensed health care</u> practitioners licensed under chapter 458, chapter 459, chapter 460, chapter 461, or chapter 466 physicians covered by s. 627.419, that is directly supervised by one or more of such physicians, and that is wholly owned by one or more of those physicians or by a physician and the spouse, parent, child, or sibling of that physician.
- partnership, or corporation, or other legal entity that provides health care services by licensed health care practitioners under chapter 457, chapter 458, chapter 459, chapter 460, chapter 461, chapter 462, chapter 463, chapter 466, chapter 467, chapter 480, chapter 484, chapter 486, chapter 490, chapter 491, or part I, part III, part X, part XIII, or part XIV of chapter 468, or s. 464.012, which 10:54 AM 04/19/06 s2112cld-cj14-b01

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1	entities are wholly owned by one or more licensed health care
2	practitioners, or the licensed health care practitioners set
3	forth in this paragraph and the spouse, parent, child, or
4	sibling of a licensed health care practitioner, so long as one
5	of the owners who is a licensed health care practitioner is
6	supervising the <u>health care services</u> <del>business activities</del> and
7	is legally responsible for the entity's compliance with all
8	federal and state laws. However, <del>a</del> health care <u>services</u>
9	provided may not exceed the scope of the licensed owner's
10	health care practitioner may not supervise services beyond the
11	scope of the practitioner's license, except that, for the
12	purposes of this part, a clinic owned by a licensee in s.
13	456.053(3)(b) that provides only services authorized pursuant
14	to s. 456.053(3)(b) may be supervised by a licensee specified
15	in s. 456.053(3)(b).
16	(h) Clinical facilities affiliated with an accredited
17	medical school at which training is provided for medical
18	students, residents, or fellows.

- (i) Entities that provide only oncology or radiation therapy services by physicians licensed under chapter 458 or chapter 459 which are owned by a corporation whose shares are publicly traded on a registered stock exchange.
- (j) Clinical facilities affiliated with a college of chiropractic accredited by the Council on Chiropractic Education at which training is provided for chiropractic students.
- (k) Clinical facilities that are wholly owned,
  directly or indirectly, by a publicly traded corporation. As
  used in this paragraph, a "publicly traded corporation" is a
  corporation that issues securities traded on an exchange
  registered with the United States Securities and Exchange

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1	Commission as a national securities exchange.
2	(8) "Specialty clinic" means a clinic not licensed as
3	a home health agency which provides infusion therapy services
4	either to outpatients who remain less than 24 hours at the
5	facility or to patients who receive such services where they
6	reside. The term does not include:
7	(a) Entities licensed under part II, part III, or part
8	<u>IV; or</u>
9	(b) Entities licensed under chapter 395.
10	(9) "Infusion therapy" includes, but is not limited
11	to, the therapeutic infusion of substances into, or injection
12	of substances through, the venous peripheral system,
13	consisting of activity that includes: observing, initiating,
14	monitoring, discontinuing, maintaining, regulating, adjusting,
15	documenting, planning, intervening, and evaluating. This
16	definition embraces administration of nutrition, antibiotic
17	therapy, and fluid and electrolyte repletion.
18	(10) "Fraud" means deception or misrepresentation made
19	by a person or business entity with the intent that the
20	deception will likely result in an unauthorized benefit to
21	herself or himself or to another person. The term includes any
22	act that constitutes fraud under applicable federal or state
23	law.
24	Section 3. Section 400.991, Florida Statutes, is
25	amended to read:
26	400.991 License requirements; background screenings;
27	prohibitions
28	(1)(a) Each clinic and specialty clinic, as defined in
29	s. 400.9905, must be licensed and shall at all times maintain
30	a valid license with the agency. Each clinic and specialty
31	<pre>clinic location shall be licensed separately regardless of 6</pre>
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whether the clinic or specialty clinic is operated under the same business name or management as another clinic.

- (b) Each mobile clinic and specialty clinic must obtain a separate health care clinic license and must provide to the agency, at least quarterly, its projected street location to enable the agency to locate and inspect such clinic and specialty clinic. A portable equipment provider must obtain a health care clinic license for a single administrative office and is not required to submit quarterly projected street locations.
- (c) A specialty clinic operating without a specialty clinic license at the time of the effective date of this act shall be given a reasonable time, not to exceed 6 months from the effective date of this act, to obtain a specialty clinic license.
- (2) The initial clinic license application shall be filed with the agency by all clinics, as defined in s. 400.9905, on or before July 1, 2004. A clinic license and specialty clinic license must be renewed biennially.
- (3) Applicants that submit an application on or before July 1, 2004, which meets all requirements for initial 22 licensure as specified in this section shall receive a temporary license until the completion of an initial inspection verifying that the applicant meets all requirements in rules authorized in s. 400.9925. However, a clinic engaged in magnetic resonance imaging services may not receive a 26 temporary license unless it presents evidence satisfactory to 28 the agency that such clinic is making a good faith effort and 29 substantial progress in seeking accreditation required under s. 400.9935. 30
  - (4) Application for an initial clinic or specialty 10:54 AM 04/19/06 s2112c1d-cj14-b01

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clinic license or for renewal of an existing license shall be notarized on forms furnished by the agency and must be accompanied by the appropriate license fee as provided in s. 3 400.9925. The agency shall take final action on an initial license application within 60 days after receipt of all 5 required documentation. 6 7 (5)(a) The application shall contain information that includes, but need not be limited to, information pertaining 8 to the name, residence and business address, phone number, 10 social security number, and license number of the medical or 11 clinic director, of the licensed medical providers employed or under contract with the clinic, and of each person who, 12 directly or indirectly, owns or controls 5 percent or more of 13 an interest in the clinic, or general partners in limited 14 15 liability partnerships. 16 (b) Any person or entity that has a pecuniary interest in a clinic who may or may not own stock or an equivalent 17 interest in the clinic, but nonetheless has control over or 18 19 the authority to approve, directly or indirectly, clinic 20 billing, policy, business activities, or personnel decisions, including, but not limited to, contracted or employed 21 22 third-party billing persons or entities, managers, and 23 management companies, and persons and entities, directly or 2.4 indirectly, which lend, give, or gift money of any denomination or any thing of value exceeding an aggregate of 25 \$5,000, for clinic use, with or without an expectation of a 26 return of the money or thing of value, and regardless of 27 profit motive, are subject to background screening 28 29 requirements under this part. (c) The agency may adopt rules to administer this 30 31 subsection.

1	(6) An application for a specialty clinic shall
2	contain, in addition to the information required in subsection
3	<u>(5):</u>
4	(a) The correct business name of each business entity
5	and full name of each individual holding any ownership
6	interest of 5 percent or more, or any pecuniary interest of
7	\$5,000 or more, in any legal entity that owns or operates any
8	specialty clinic seeking licensure, whether such ownership or
9	pecuniary interest arose out of a contract, loan, gift,
10	investment, inheritance, or any other source. Individual
11	possession of an ownership or pecuniary interest in any
12	subject specialty clinic includes, but is not limited to, a
13	direct or indirect interest in:
14	1. The business operation, equipment, or legend
15	pharmaceuticals used in the clinic;
16	2. The premises in which the clinic provides its
17	services; or
18	3. Any legal entity that owns any such interest,
19	directly or indirectly, in the business operation of the
20	clinic; the equipment used in providing infusion therapy
21	services at the clinic; the legend pharmaceuticals used at the
22	clinic; or the premises in which the clinic provides its
23	services.
24	(b) In the case of an incorporated business entity
25	that holds any ownership interest of 5 percent or more, or any
26	pecuniary interest of \$5,000 or more, in the specialty clinic,
27	copies of the articles of incorporation and bylaws, and the
28	names and addresses of all officers and directors of the
29	corporation.
30	(c) On a form furnished by the agency, a sworn
31	notarized statement by each business entity and individual
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1	that holds any ownership interest of 5 percent or more, or any
2	pecuniary interest of \$5,000 or more, in the subject specialty
3	clinic which discloses the nature and degree of each such
4	ownership or pecuniary interest, and that discloses the source
5	of funds which gave rise to each such ownership or pecuniary
6	interest.
7	(d) On a form furnished by the agency, a sworn
8	notarized statement by each individual and business entity
9	that holds any ownership interest of 5 percent or more, or any
10	pecuniary interest of \$5,000 or more, in the subject specialty
11	clinic which discloses whether he or she has been an owner or
12	part owner, individually or through any business entity, of
13	any business entity whose health care license has been revoked
14	or suspended in any jurisdiction.
15	(e) On a form furnished by the agency, an estimate of
16	the costs for establishing the specialty clinic and the source
17	of funds for payment of those costs and for sustaining the
18	operation of the clinic until its operation produces a
19	positive cash flow.
20	
21	For purposes of this subsection, the term "ownership or
22	pecuniary interest does not include any individual whose
23	interest in a specialty clinic arises only out of his or her
24	interest in a lending company, insurance company, or banking
25	institution licensed by this state or any other state of the
26	United States; a company regularly trading on a national stock
27	exchange of the United States; or a governmental entity in the
28	United States.
29	(7)(6) The applicant must file with the application
30	satisfactory proof that the clinic or specialty clinic is in
31	compliance with this part and applicable rules, including:
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- (a) A listing of services to be provided eitherdirectly by the applicant or through contractual arrangementswith existing providers;(b) The number and discipline of each professionalstaff member to be employed; and
- (c) Proof of financial ability to operate. An applicant must demonstrate financial ability to operate a clinic or specialty clinic by submitting a balance sheet and an income and expense statement for the first year of operation which provide evidence of the applicant's having sufficient assets, credit, and projected revenues to cover liabilities and expenses. The applicant shall have demonstrated financial ability to operate if the applicant's assets, credit, and projected revenues meet or exceed projected liabilities and expenses. All documents required under this subsection must be prepared in accordance with generally accepted accounting principles, may be in a compilation form, and the financial statement must be signed by a certified public accountant. As an alternative to submitting a balance sheet and an income and expense statement for the first year of operation, the applicant may file a surety bond of at least \$500,000 which guarantees that the clinic will act in full conformity with all legal requirements for operating a clinic, payable to the agency. The agency may adopt rules to specify related requirements for such surety bond.
- (8)(7) Each applicant for licensure shall comply with the following requirements:
- (a) As used in this subsection, the term "applicant" means either an individual individuals owning or controlling, directly or indirectly, 5 percent or more of an interest in a 11 s2112c1d-cj14-b01

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clinic or an individual owning or controlling, directly or
indirectly, any interest in a specialty clinic; the medical or
clinic director, or a similarly titled person who is
responsible for the day-to-day operation of the licensed
clinic; the financial officer or similarly titled individual
who is responsible for the financial operation of the clinic;
and licensed health care practitioners at the clinic.

- (b) Upon receipt of a completed, signed, and dated application, the agency shall require background screening of the applicant, in accordance with the level 2 standards for screening set forth in paragraph (d) chapter 435. Proof of compliance with the level 2 background screening requirements of paragraph (d) chapter 435 which has been submitted within the previous 5 years in compliance with the any other health care clinic licensure requirements of this part state is acceptable in fulfillment of this paragraph. Applicants who own less than 10 percent of a health care clinic are not required to submit fingerprints under this section.
- (c) Each applicant must submit to the agency, with the application, a description and explanation of any exclusions, permanent suspensions, or terminations of an applicant from the Medicare or Medicaid programs. Proof of compliance with the requirements for disclosure of ownership and control interest under the Medicaid or Medicare programs may be accepted in lieu of this submission. The description and explanation may indicate whether such exclusions, suspensions, or terminations were voluntary or not voluntary on the part of the applicant. The agency may deny or revoke licensure based on information received under this paragraph.
- (d) A license may not be granted to a clinic if the applicant, or a person or entity identified in paragraph

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1	(5)(b), has been found guilty of, regardless of adjudication,
2	or has entered a plea of nolo contendere or guilty to, any
3	offense prohibited under the level 2 standards for screening
4	set forth in chapter 435; any felony under chapter 400,
5	chapter 408, chapter 409, chapter 440, chapter 624, chapter
6	626, chapter 627, chapter 812, chapter 817, chapter 831,
7	chapter 837, chapter 838, chapter 895, or chapter 896; or any
8	substantially comparable offense or crime of another state or
9	of the United States, if a felony in that jurisdiction, within
10	the past 10 years. Each person required to provide background
11	screening shall disclose to the agency any arrest for any
12	crime for which any court disposition other than dismissal has
13	been made within the past 10 years. Failure to provide such
14	information shall be considered a material omission in the
15	application process., or a violation of insurance fraud under
16	s. 817.234, within the past 5 years. If the applicant has been
17	convicted of an offense prohibited under the level 2 standards
17 18	or insurance fraud in any jurisdiction, the applicant must
18	or insurance fraud in any jurisdiction, the applicant must
18 19	or insurance fraud in any jurisdiction, the applicant must show that his or her civil rights have been restored prior to
18 19 20	or insurance fraud in any jurisdiction, the applicant must show that his or her civil rights have been restored prior to submitting an application.
18 19 20 21	or insurance fraud in any jurisdiction, the applicant must show that his or her civil rights have been restored prior to submitting an application.  (e) The agency may deny or revoke licensure or
18 19 20 21 22	or insurance fraud in any jurisdiction, the applicant must show that his or her civil rights have been restored prior to submitting an application.  (e) The agency may deny or revoke licensure or exemption if the applicant has falsely represented any
18 19 20 21 22 23	or insurance fraud in any jurisdiction, the applicant must show that his or her civil rights have been restored prior to submitting an application.  (e) The agency may deny or revoke licensure or exemption if the applicant has falsely represented any material fact or omitted any material fact from the
18 19 20 21 22 23 24	or insurance fraud in any jurisdiction, the applicant must show that his or her civil rights have been restored prior to submitting an application.  (e) The agency may deny or revoke licensure or exemption if the applicant has falsely represented any material fact or omitted any material fact from the application which is permitted or required by this part.
18 19 20 21 22 23 24 25	or insurance fraud in any jurisdiction, the applicant must show that his or her civil rights have been restored prior to submitting an application.  (e) The agency may deny or revoke licensure or exemption if the applicant has falsely represented any material fact or omitted any material fact from the application which is permitted or required by this part.  (f) Each applicant that performs the technical
18 19 20 21 22 23 24 25 26	or insurance fraud in any jurisdiction, the applicant must show that his or her civil rights have been restored prior to submitting an application.  (e) The agency may deny or revoke licensure or exemption if the applicant has falsely represented any material fact or omitted any material fact from the application which is permitted or required by this part.  (f) Each applicant that performs the technical component of magnetic resonance imaging, static radiographs,
18 19 20 21 22 23 24 25 26 27	or insurance fraud in any jurisdiction, the applicant must show that his or her civil rights have been restored prior to submitting an application.  (e) The agency may deny or revoke licensure or exemption if the applicant has falsely represented any material fact or omitted any material fact from the application which is permitted or required by this part.  (f) Each applicant that performs the technical component of magnetic resonance imaging, static radiographs, computed tomography, or positron emission tomography, and also
18 19 20 21 22 23 24 25 26 27 28	or insurance fraud in any jurisdiction, the applicant must show that his or her civil rights have been restored prior to submitting an application.  (e) The agency may deny or revoke licensure or exemption if the applicant has falsely represented any material fact or omitted any material fact from the application which is permitted or required by this part.  (f) Each applicant that performs the technical component of magnetic resonance imaging, static radiographs, computed tomography, or positron emission tomography, and also provides the professional components of such services through
18 19 20 21 22 23 24 25 26 27 28 29	or insurance fraud in any jurisdiction, the applicant must show that his or her civil rights have been restored prior to submitting an application.  (e) The agency may deny or revoke licensure or exemption if the applicant has falsely represented any material fact or omitted any material fact from the application which is permitted or required by this part.  (f) Each applicant that performs the technical component of magnetic resonance imaging, static radiographs, computed tomography, or positron emission tomography, and also provides the professional components of such services through an employee or independent contractor must provide to the

1	resonance imaging, static radiograph, computed tomography, and
2	positron emission tomography machine, the name of the
3	manufacturer of the machine, and such other information as
4	required by the agency to identify the machine. The
5	information must be provided to the agency upon renewal of the
6	clinic's licensure and within 30 days after a clinic begins
7	using a machine for which it has not provided the information
8	to the agency.
9	(g) The agency shall deny or revoke a specialty clinic
10	license if an applicant has been found guilty of, regardless
11	of adjudication, or entered a plea of nolo contendere or
12	guilty to, any felony involving dishonesty or making a false
13	statement in any jurisdiction within the preceding 10 years.
14	(h) The agency shall deny a specialty clinic license
15	application when any business entity or individual possessing
16	an ownership or pecuniary interest in the specialty clinic
17	also possessed an ownership or pecuniary interest,
18	individually or through any business entity, in any health
19	care facility whose license was revoked in any jurisdiction
20	during the pendency of that interest.
21	(i) The agency may not issue a specialty clinic
22	license to any applicant to whom the agency has sent notice
23	that there is a pending question as to whether one or more of
24	the individuals with an ownership of 5 percent or more or with
25	a pecuniary interest of \$5,000 or more in the clinic has a
26	disqualifying criminal record. The agency notice shall request
27	the applicant to submit any additional information necessary
28	to resolve the pending criminal background question within 21
29	days after receipt of the notice. The agency shall deny a
30	specialty clinic license application when the applicant has
31	failed to resolve a criminal background screening issue
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pertaining to an individual who is required to meet criminal background screening requirements of this part and the agency 2 raised such background screening issue by notice as set forth 3 4 in this part. (9)(8) Requested information omitted from an 5 application for licensure, license renewal, or transfer of 7 ownership must be filed with the agency within 21 days after receipt of the agency's request for omitted information, or 8 the application shall be deemed incomplete and shall be 9 10 withdrawn from further consideration.  $(10)\frac{(9)}{(9)}$  The failure to file a timely renewal 11 application shall result in a late fee charged to the facility 12 13 in an amount equal to 50 percent of the current license fee. Section 4. Section 400.9915, Florida Statutes, is 14 15 amended to read: 16 400.9915 Clinic inspections; emergency suspension; costs.--17 (1) Any authorized officer or employee of the agency 18 19 shall make inspections of the clinic or specialty clinic as part of the initial license application or renewal 20 21 application. The application for a clinic or specialty clinic 22 license issued under this part or for a renewal license constitutes permission for an appropriate agency inspection to 23 24 verify the information submitted on or in connection with the application or renewal. 25 (2) An authorized officer or employee of the agency 26 may make unannounced inspections of clinics and specialty 27 clinics licensed pursuant to this part as are necessary to 28 29 determine that the clinic or specialty clinic is in compliance

with this part and with applicable rules. A licensed clinic or

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premises and to billing records or information to any representative of the agency who makes an inspection to determine compliance with this part and with applicable rules.

- under this part to allow full and complete access to the premises and to billing records or information to any representative of the agency who makes a request to inspect the clinic or specialty clinic to determine compliance with this part or failure by a clinic or specialty clinic to employ a qualified medical director or clinic director constitutes a ground for emergency suspension of the license by the agency pursuant to s. 120.60(6).
- (4) In addition to any administrative fines imposed, the agency may assess a fee equal to the cost of conducting a complaint investigation.
- Section 5. Section 400.992, Florida Statutes, is amended to read:
- 400.992 License renewal; transfer of ownership; provisional license.--
- (1) An application for license renewal must contain information as required by the agency.
- (2) Ninety days before the expiration date, an application for renewal must be submitted to the agency.
- (3) The clinic <u>or specialty clinic</u> must file with the renewal application satisfactory proof that it is in compliance with this part and applicable rules. If there is evidence of financial instability, the clinic <u>or specialty</u> <u>clinic</u> must submit satisfactory proof of its financial ability to comply with the requirements of this part.
- 30 (4) When transferring the ownership of a clinic <u>or</u>
  31 <u>specialty clinic</u>, the transferee must submit an application
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for a license at least 60 days before the effective date of
the transfer. An application for change of ownership of a
clinic or specialty clinic is required only when 45 percent or
more of the ownership, voting shares, or controlling interest
of a clinic or specialty clinic is transferred or assigned,
including the final transfer or assignment of multiple
transfers or assignments over a 2-year period that
cumulatively total 45 percent or greater.

- (5) The license may not be sold, leased, assigned, or otherwise transferred, voluntarily or involuntarily, and is valid only for the clinic <u>or specialty clinic</u> owners and location for which originally issued.
- (6) A clinic or specialty clinic against whom a revocation or suspension proceeding is pending at the time of license renewal may be issued a provisional license effective until final disposition by the agency of such proceedings. If judicial relief is sought from the final disposition, the agency that has jurisdiction may issue a temporary permit for the duration of the judicial proceeding.
- Section 6. Section 400.9925, Florida Statutes, is amended to read:
  - 400.9925 Rulemaking authority; license fees.--
- administer the clinic and specialty clinic administration, regulation, and licensure program, including rules establishing the specific licensure requirements, procedures, forms, and fees. It shall adopt rules establishing a procedure for the biennial renewal of licenses. The agency may issue initial licenses for less than the full 2-year period by charging a prorated licensure fee and specifying a different renewal date than would otherwise be required for biennial 17 second 10:54 AM 04/19/06 second 2112cld-cj14-b01

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licensure. The rules shall specify the expiration dates of licenses, the process of tracking compliance with financial responsibility requirements, and any other conditions of renewal required by law or rule.

- limitations on the number of licensed clinics and specialty clinics and licensees for which a medical director or a clinic director may assume responsibility for purposes of this part.

  In determining the quality of supervision a medical director or a clinic director can provide, the agency shall consider the number of clinic or specialty clinic employees, the clinic or specialty clinic location, and the health care services provided by the clinic or specialty clinic.
- reasonably calculated by the agency to cover its costs in carrying out its responsibilities under this part, including the cost of licensure, inspection, and regulation of clinics and specialty clinics, and must be of such amount that the total fees collected do not exceed the cost of administering and enforcing compliance with this part. Clinic and specialty clinic licensure fees are nonrefundable and may not exceed \$2,000. The agency shall adjust the license fee annually by not more than the change in the Consumer Price Index based on the 12 months immediately preceding the increase. All fees collected under this part must be deposited in the Health Care Trust Fund for the administration of this part.

Section 7. Section 400.993, Florida Statutes, is amended to read:

400.993 Unlicensed clinics; penalties; fines; verification of licensure status.--

(1) It is unlawful to own, operate, or maintain a \$18\$ 10:54 AM 04/19/06  $$2112cld\mbox{-cjl4-b01}$ 

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clinic <u>or specialty clinic</u> without obtaining a license under this part.

- (2) Any person who owns, operates, or maintains an unlicensed clinic or specialty clinic commits a felony of the third degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084. Each day of continued operation is a separate offense.
  - (3) Any person found guilty of violating subsection (2) a second or subsequent time commits a felony of the second degree, punishable as provided under s. 775.082, s. 775.083, or s. 775.084. Each day of continued operation is a separate offense.
- (4) Any person who owns, operates, or maintains an unlicensed clinic or specialty clinic due to a change in this part or a modification in agency rules within 6 months after the effective date of such change or modification and who, within 10 working days after receiving notification from the agency, fails to cease operation or apply for a license under this part commits a felony of the third degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084. Each day of continued operation is a separate offense.
- (5) Any clinic <u>or specialty clinic</u> that fails to cease operation after agency notification may be fined for each day of noncompliance pursuant to this part.
- (6) When a person has an interest in more than one clinic <u>or specialty clinic</u>, and fails to obtain a license for any one of these clinics, the agency may revoke the license, impose a moratorium, or impose a fine pursuant to this part on any or all of the licensed clinics <u>or specialty clinics</u> until such time as the unlicensed clinic <u>or specialty clinics</u> is licensed or ceases operation.

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- (7) Any person aware of the operation of an unlicensed clinic or specialty clinic must report that facility to the agency.
- (8) Any health care provider who is aware of the operation of an unlicensed clinic or specialty clinic shall report that facility to the agency. Failure to report a clinic or specialty clinic that the provider knows or has reasonable cause to suspect is unlicensed shall be reported to the provider's licensing board.
- (9) The agency may not issue a license to a clinic <u>or</u> <u>specialty clinic</u> that has any unpaid fines assessed under this part.
- Section 8. Section 400.9935, Florida Statutes, is amended to read:

400.9935 Clinic responsibilities.--

- (1) Each clinic <u>and specialty clinic</u> shall appoint a medical director or clinic director who shall agree in writing to accept legal responsibility for the following activities on behalf of the clinic. The medical director or the clinic director shall:
- (a) Have signs identifying the medical director or clinic director posted in a conspicuous location within the clinic readily visible to all patients.
- (b) Ensure that all practitioners providing health care services or supplies to patients maintain a current active and unencumbered Florida license.
- (c) Review any patient referral contracts or agreements executed by the clinic.
- 29 (d) Ensure that all health care practitioners at the 30 clinic have active appropriate certification or licensure for 31 the level of care being provided.

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1	(e) Ensure that all health care practitioners at the
2	clinic provide health care services in accordance with the
3	requirements of subsection (6).
4	$\frac{(f)}{(e)}$ Serve as the clinic records owner as defined in
5	s. 456.057.
6	$\frac{(g)(f)}{f}$ Ensure compliance with the recordkeeping,
7	office surgery, and adverse incident reporting requirements of
8	chapter 456, the respective practice acts, and rules adopted
9	under this part.
10	$rac{ ext{(h)} ext{(g)}}{ ext{}}$ Conduct systematic reviews of clinic billings
11	to ensure that the billings are not fraudulent or unlawful.
12	Upon discovery of an unlawful charge, the medical director or
13	clinic director shall take immediate corrective action. If the
14	clinic performs only the technical component of magnetic
15	resonance imaging, static radiographs, computed tomography, or
16	positron emission tomography, and provides the professional
17	interpretation of such services, in a fixed facility that is
18	accredited by the Joint Commission on Accreditation of
19	Healthcare Organizations or the Accreditation Association for
20	Ambulatory Health Care, and the American College of Radiology;
21	and if, in the preceding quarter, the percentage of scans
22	performed by that clinic which was billed to all personal
23	injury protection insurance carriers was less than 15 percent,
24	the chief financial officer of the clinic may, in a written
25	acknowledgment provided to the agency, assume the
26	responsibility for the conduct of the systematic reviews of
27	clinic billings to ensure that the billings are not fraudulent
28	or unlawful.
29	(i) Serve in that capacity for no more than a maximum
30	of five health care clinics that have a cumulative total of no
31	more than 200 employees and persons under contract with the
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health care clinic at a given time. A medical or clinic

director may not supervise a health care clinic more than 200

miles away from any other health care clinic supervised by the

same medical or clinic director. The agency may allow for

waivers to the limitations of this paragraph upon a showing of

good cause and a determination by the agency that the medical

director will be able to adequately perform the requirements

of this subsection.

- (2) Any business that becomes a clinic <u>or specialty</u> <u>clinic</u> after commencing operations must, within 5 days after becoming a clinic <u>or specialty clinic</u>, file a license application under this part and shall be subject to all provisions of this part applicable to a clinic <u>or specialty</u> clinic.
- (3) Any contract to serve as a medical director or a clinic director entered into or renewed by a physician or a licensed health care practitioner in violation of this part is void as contrary to public policy. This subsection shall apply to contracts entered into or renewed on or after March 1, 2004.
- (4) All charges or reimbursement claims made by or on behalf of a clinic <u>or specialty clinic</u> that is required to be licensed under this part, but that is not so licensed, or that is otherwise operating in violation of this part, are unlawful charges, and therefore are noncompensable and unenforceable.
- (5) Any person establishing, operating, or managing an unlicensed clinic <u>or specialty clinic</u> otherwise required to be licensed under this part, or any person who knowingly files a false or misleading license application or license renewal application, or false or misleading information related to such application or department rule, commits a felony of the 22 s2112c1d-cj14-b01

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1 third degree, punishable as provided in s. 775.082, s.
2 775.083, or s. 775.084.

(6) All persons providing health care services to individuals must comply with the licensure laws and rules under which that person is licensed to provide such services or as otherwise provided by law.

(7)(6) Any licensed health care provider who violates this part is subject to discipline in accordance with this chapter and his or her respective practice act.

(8)(7) The agency may fine, or suspend or revoke the license of, any clinic <u>or specialty clinic</u> licensed under this part for operating in violation of the requirements of this part or the rules adopted by the agency.

 $\underline{(9)(8)}$  The agency shall investigate allegations of noncompliance with this part and the rules adopted under this part.

(10)(9) Any person or entity providing health care services which is not a clinic or specialty clinic, as defined under s. 400.9905, may voluntarily apply for a certificate of exemption from licensure under its exempt status. Certificates of exemption shall expire in 2 years and may be renewed. with the agency on a form that sets forth its name or names and addresses, a statement of the reasons why it cannot be defined as a clinic, and other information deemed necessary by the agency. An exemption is not transferable. The agency may charge an applicant for a certificate of exemption in an amount equal to \$100 or the actual cost of processing the certificate, whichever is less.

(a) The agency shall provide a form that requires the name or names and addresses, a statement of the reasons why the applicant is exempt from licensure as a health care clinic 23

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1	or specialty clinic, and other information deemed necessary by
2	the agency. The signature on an application for a certificate
3	of exemption must be notarized and signed by persons having
4	knowledge of the truth of its contents. An exemption is not
5	transferable and is valid only for the reasons, location,
6	persons, and entity set forth on the application form. A
7	person or entity claiming an exemption under this part or
8	issued a current certificate of exemption must be exempt from
9	the licensing provisions of this part at all times, or such
10	claim or certificate shall be invalid from the date that such
11	person or entity is not exempt.
12	(b) The agency shall charge an applicant for a
13	certificate of exemption a fee of \$100 to cover the cost of
14	processing the certificate or the actual cost of processing
15	the certificate, whichever is less.
16	(c) An application for the renewal of a certificate of
17	exemption must be submitted to the agency prior to the
18	expiration of the certificate of exemption. The agency may
19	investigate any applicant, person, or entity claiming an
20	exemption for purposes of determining compliance when a
21	certificate of exemption is sought. Authorized personnel of
22	the agency shall have access to the premises of any
23	certificateholder, applicant, or specialty clinic for the sole
24	purpose of determining compliance with an exemption under this
25	part. The agency shall have access to all billings and records
26	indicated in s. 400.9915(2) and agency rules. The agency may
27	deny or withdraw a certificate of exemption when a person or
28	entity does not qualify under this part.
29	(d) A certificate of exemption is considered withdrawn
30	when the agency determines that an exempt status cannot be
31	confirmed. The provisions applicable to the unlicensed
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1	operation of a health care clinic or specialty clinic apply to
2	any health care provider that self-determines or claims an
3	exemption or that is issued a certificate of exemption if, in
4	fact, such clinic does not meet the exemption claimed.
5	(e) Any person or entity that submits an application
6	for a certificate of exemption which contains fraudulent or
7	material and misleading information commits a felony of the
8	third degree, punishable as provided in s. 775.082, s.
9	775.083, or s. 775.084.
10	(f) A response to a request in writing for additional
11	information or clarification must be filed with the agency no
12	later than 21 days after receipt of the request or the
13	application shall be denied.
14	(g) The agency shall grant or deny an application for
15	a certificate of exemption in accordance with s. 120.60(1).
16	(h) A person or entity that qualifies as a health care
17	clinic or specialty clinic and has been denied a certificate
18	of exemption must file an initial application and pay the fee.
19	A certificate of exemption is valid only when issued and
20	<u>current.</u>
21	(i) The agency shall issue an emergency order of
22	suspension of a certificate of exemption when the agency finds
23	that the applicant has provided false or misleading material
24	information or omitted any material fact from the application
25	for a certificate of exemption which is permitted or required
26	by this part, or has submitted false or misleading information
27	to the agency when self-determining an exempt status and
28	materially misleading the agency as to such status.
29	$rac{(11)}{(10)}$ The clinic or specialty clinic shall display
30	its license in a conspicuous location within the clinic
31	readily visible to all patients.
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(12)(11)(a) Each clinic engaged in magnetic resonance imaging services must be accredited by the Joint Commission on Accreditation of Healthcare Organizations, the American College of Radiology, or the Accreditation Association for Ambulatory Health Care, within 1 year after licensure. However, a clinic may request a single, 6-month extension if it provides evidence to the agency establishing that, for good cause shown, such clinic can not be accredited within 1 year after licensure, and that such accreditation will be completed within the 6-month extension. After obtaining accreditation as required by this subsection, each such clinic must maintain accreditation as a condition of renewal of its license. (b) The agency may deny the application or revoke the license of any entity formed for the purpose of avoiding compliance with the accreditation provisions of this subsection and whose principals were previously principals of an entity that was unable to meet the accreditation requirements within the specified timeframes. The agency may adopt rules as to the accreditation of magnetic resonance imaging clinics. (13)<del>(12)</del> The agency shall give full faith and credit pertaining to any past variance and waiver granted to a magnetic resonance imaging clinic from rule 64-2002, Florida Administrative Code, by the Department of Health, until September 2004. After that date, such clinic must request a variance and waiver from the agency under s. 120.542. (14) Every licensed specialty clinic shall file with the agency no less frequently than annually, including concurrently with the filing of any change of ownership application, upon forms to be furnished by the agency, an <u>audited report showing the following information:</u>

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1	(a) The number of patients served by the specialty
2	clinic during the previous 12-month period, which report may
3	exclude any partial month for the month when the report was
4	prepared;
5	(b) Total specialty clinic operating expenses;
6	(c) Gross patient charges by payor category, including
7	Medicare, Medicaid, county indigent programs, any other
8	governmental programs, private insurance, self-paying
9	patients, nonpaying patients and other payees;
10	(d) The cost of operation of the specialty clinic
11	during the previous 12-month period, excluding any partial
12	month during which time the report was prepared;
13	(e) Unless the specialty clinic can demonstrate that
14	the clinic already has furnished the required information
15	regarding a particular subject individual, the full name of
16	any individual who became an owner or became possessed of any
17	pecuniary interest in the subject clinic since the last report
18	to the agency, along with the disclosure of the information
19	required by s. 400.9961(2) as to such individual; and
20	(f) A current statement of the source of funds for
21	payment of the costs of establishing the specialty clinic and
22	for sustaining the operation of the specialty clinic until its
23	operation produces a positive cash flow.
24	(15) Every licensee of a specialty clinic has a
25	continuing obligation to comply with this part and to report
26	to the agency any change of circumstance related to the
27	clinic's continuing compliance with this part. Such change of
28	circumstance includes, but is not limited to, any change in
29	the ownership of the specialty clinic, the addition of any
30	individual or business entity possessing a pecuniary interest
31	in the specialty clinic, the employment of any individual as a 27
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1	member of the specialty clinic's staff who would be required
2	to undergo a criminal background screening if such individual
3	had been an employee at the time of the initial licensure, and
4	any change in the medical or clinic director. The clinic shall
5	furnish the information required about and of such individuals
6	under this part and s. 400.991 within 30 days of the
7	occurrence of such change of circumstance.
8	(16) The clinic or specialty clinic shall display a
9	sign in a conspicuous location within the clinic readily
10	visible to all patients indicating that, pursuant to s.
11	626.9892, the Department of Financial Services may pay rewards
12	of up to \$25,000 to persons providing information leading to
13	the arrest and conviction of persons committing crimes
14	investigated by the Division of Insurance Fraud arising from
15	violations of s. 440.105, s. 624.15, s. 626.9541, s. 626.989,
16	or s. 817.234. An authorized employee of the Division of
17	Insurance Fraud may make unannounced inspections of a clinic
18	or specialty clinic licensed under this part as necessary to
19	determine whether the clinic is in compliance with this
20	subsection. A licensed clinic or specialty clinic shall allow
21	full and complete access to the premises to such authorized
22	employee of the division who makes an inspection to determine
23	compliance with this subsection.
24	Section 9. Section 400.994, Florida Statutes, is
25	amended to read:
26	400.994 Injunctions
27	(1) The agency may institute injunctive proceedings in
28	a court of competent jurisdiction in order to:
29	(a) Enforce <del>the provisions of</del> this part or any minimum
30	standard, rule, or order issued or entered into pursuant to
31	this part if the attempt by the agency to correct a violation
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through administrative fines has failed; if the violation materially affects the health, safety, or welfare of clinic <u>or specialty clinic</u> patients; or if the violation involves any operation of an unlicensed clinic <u>or specialty clinic</u>.

- (b) Terminate the operation of a clinic <u>or specialty</u> <u>clinic</u> if a violation of any provision of this part, or any rule adopted pursuant to this part, materially affects the health, safety, or welfare of clinic <u>or specialty clinic</u> patients.
- (2) Such injunctive relief may be temporary or permanent.
- specialty clinic patients from life-threatening situations, the court may allow a temporary injunction without bond upon proper proof being made. If it appears by competent evidence or a sworn, substantiated affidavit that a temporary injunction should issue, the court, pending the determination on final hearing, shall enjoin operation of the clinic or specialty clinic.

Section 10. Section 400.995, Florida Statutes, is amended to read:

400.995 Agency administrative penalties .--

- (1) The agency may deny the application for a license renewal, revoke or suspend the license, and impose administrative fines of up to \$5,000 per violation for violations of the requirements of this part or rules of the agency. In determining if a penalty is to be imposed and in fixing the amount of the fine, the agency shall consider the following factors:
- 30 (a) The gravity of the violation, including the
  31 probability that death or serious physical or emotional harm
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to a patient will result or has resulted, the severity of the action or potential harm, and the extent to which the provisions of the applicable laws or rules were violated.

- (b) Actions taken by the owner, medical director, or clinic director to correct violations.
  - (c) Any previous violations.
- (d) The financial benefit to the clinic <u>or specialty</u> <u>clinic</u> of committing or continuing the violation.
- (2) Each day of continuing violation after the date fixed for termination of the violation, as ordered by the agency, constitutes an additional, separate, and distinct violation.
- (3) Any action taken to correct a violation shall be documented in writing by the owner, medical director, or clinic director of the clinic <u>or specialty clinic</u> and verified through followup visits by agency personnel. The agency may impose a fine and, in the case of an owner-operated clinic <u>or specialty clinic</u>, revoke or deny a clinic's license when a clinic medical director or clinic director knowingly misrepresents actions taken to correct a violation.
- (4) For fines that are upheld following administrative or judicial review, the violator shall pay the fine, plus interest at the rate as specified in s. 55.03, for each day beyond the date set by the agency for payment of the fine.
- (5) Any unlicensed clinic <u>or specialty clinic</u> that continues to operate after agency notification is subject to a \$1,000 fine per day.
- (6) Any licensed clinic <u>or specialty clinic</u> whose owner, medical director, or clinic director concurrently operates an unlicensed clinic <u>or specialty clinic</u> shall be subject to an administrative fine of \$5,000 per day.

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- (7) Any clinic <u>or specialty clinic</u> whose owner fails to apply for a change-of-ownership license in accordance with s. 400.992 and operates the clinic <u>or specialty clinic</u> under the new ownership is subject to a fine of \$5,000.
- (8) The agency, as an alternative to or in conjunction with an administrative action against a clinic <u>or specialty clinic</u> for violations of this part and adopted rules, shall make a reasonable attempt to discuss each violation and recommended corrective action with the owner, medical director, or clinic director of the clinic <u>or specialty clinic</u>, prior to written notification. The agency, instead of fixing a period within which the clinic <u>or specialty clinic</u> shall enter into compliance with standards, may request a plan of corrective action from the clinic <u>or specialty clinic</u> which demonstrates a good faith effort to remedy each violation by a specific date, subject to the approval of the agency.
- (9) Administrative fines paid by any clinic <u>or</u> <u>specialty clinic</u> under this section shall be deposited into the Health Care Trust Fund.
- (10) If the agency issues a notice of intent to deny a license application after a temporary license has been issued pursuant to s. 400.991(3), the temporary license shall expire on the date of the notice and may not be extended during any proceeding for administrative or judicial review pursuant to chapter 120.

Section 11. Section 400.996, Florida Statutes, is created to read:

400.996 Specialty clinics; complaints; audits; referrals.--

(1) The agency shall receive, document, and process

complaints about specialty clinics. Upon receipt of any

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1	complaint that asserts the existence of facts evidencing
2	possible billing fraud by a specialty clinic or by any
3	employee of a specialty clinic, the agency shall request the
4	complainant to make such assertions by sworn affidavit.
5	(2) Upon receipt of any sworn affidavit that asserts
6	the existence of facts evidencing possible billing fraud by a
7	specialty clinic or any of its employees, the agency shall
8	refer the complaint to the Department of Financial Services,
9	Office of Fiscal Integrity.
10	(3) The Department of Financial Services shall report
11	findings to the agency for any appropriate licensure action.
12	Such report shall include a statement of facts as determined
13	by the Department of Financial Services to exist, specifically
14	with regard to the possible violations of licensure
15	requirements. If during an investigation the department has
16	reason to believe that any criminal law of this state has or
17	may have been violated, the department shall refer such
18	investigation to appropriate prosecutorial agencies and shall
19	provide investigative assistance to those agencies as
20	required.
21	(4) The investigating authority and the agency shall
22	cooperate with each other with respect to preparing a record
23	and sharing information from which the agency may determine if
24	any action for sanctions under this part by the agency is
25	warranted.
26	(5) Any person submitting a sworn complaint that
27	initiates a complaint investigation pursuant to this section,
28	which sworn complaint is determined to be totally without any
29	factual basis to support the assertions made in the complaint
30	that facts existed evidencing possible fraudulent practices by
31	a specialty clinic or any of its employees, shall be quilty of
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1	a misdemeanor of the first degree, punishable as provided in
2	s. 775.082 or s. 775.083.
3	(6) The Department of Financial Services, Office of
4	Fiscal Integrity, shall conduct unannounced reviews,
5	investigations, analyses, and audits to investigate complaints
6	and, as necessary, to determine whether specialty clinic
7	billings are fraudulent or unlawful. The Department of
8	Financial Services is expressly authorized to enter upon the
9	premises of the clinic during regular business hours and
10	demand and immediately secure copies of billing and other
11	records of the clinic that will enable the Department of
12	Financial Services to investigate complaints or determine
13	whether specialty clinic billings are fraudulent or unlawful.
14	(7) A licensed specialty clinic shall allow full,
15	complete, and immediate access to the premises and to billing
16	records or information to any such officer or employee who
17	conducts a review, investigation, analysis, or audit to
18	determine compliance with this part and with applicable rules.
19	Failure to allow full, complete, and immediate access to the
20	premises and to billing records or information to any
21	representative of the agency or Department of Financial
22	Services who attempts to conduct a review, investigation,
23	analysis, or audit to determine compliance with this part
24	constitutes a ground for emergency suspension of the license
25	by the agency pursuant to s. 120.60(6).
26	(8) In addition to any administrative fines imposed,
27	the agency may assess a fee equal to the cost of conducting
28	any review, investigation, analysis, or audit performed by the
29	agency or the department.
30	(9) All investigators designated by the Chief
31	Financial Officer to perform duties under this part and who 33
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1	are certified under s. 943.1395 are law enforcement officers			
2	of the state. Such investigators have the authority to conduct			
3	criminal investigations, bear arms, make arrests, and apply			
4	for, serve, and execute search warrants, arrest warrants,			
5	capias, and other process throughout the state pertaining to			
6	fraud investigations under this section.			
7	Section 12. Paragraph (hh) is added to subsection (1)			
8	of section 456.072, Florida Statutes, to read:			
9	456.072 Grounds for discipline; penalties;			
10	enforcement			
11	(1) The following acts shall constitute grounds for			
12	which the disciplinary actions specified in subsection (2) may			
13	be taken:			
14	(hh) Intentionally providing false information on an			
15	application for a certificate of exemption from clinic			
16	licensure under part XIII of chapter 400.			
17	Section 13. This act shall take effect January 1,			
18	2007.			
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20				
21	======== T I T L E A M E N D M E N T =========			
22	And the title is amended as follows:			
23	Delete everything before the enacting clause			
24				
25	and insert:			
26	A bill to be entitled			
27	An act relating to health care clinics;			
28				
	amending s. 400.990, F.S.; providing additional			
29	amending s. 400.990, F.S.; providing additional legislative findings; amending s. 400.9905,			
29 30				
	legislative findings; amending s. 400.9905,  F.S.; redefining the term "clinic" for purposes  of the Health Care Clinic Act to include			
30	legislative findings; amending s. 400.9905,  F.S.; redefining the term "clinic" for purposes			

1	certain additional providers; excluding certain
2	facilities owned by publicly traded
3	corporations; defining the terms "specialty
4	clinic," "infusion therapy," and "fraud";
5	amending s. 400.991, F.S.; requiring specialty
6	clinics to be subject to licensure
7	requirements; requiring additional persons to
8	be subject to background screening; revising
9	certain requirements for applying for licensure
10	as a health care clinic; creating additional
11	requirements for applying for licensure as a
12	specialty clinic; providing additional grounds
13	under which an applicant may be denied
14	licensure due to a finding of guilt for
15	committing a felony; providing grounds for the
16	denial of specialty clinic licensure; amending
17	s. 400.9915, F.S.; including specialty clinics
18	within clinic inspection requirements; amending
19	s. 400.992, F.S.; including specialty clinics
20	within requirements for license renewal,
21	transfer of ownership, and provisional
22	licensure; amending s. 400.9925, F.S.;
23	providing the agency with rulemaking authority
24	regarding specialty clinics; stating that the
25	licensure fee for a specialty clinic is
26	nonrefundable and may not exceed \$2,000;
27	amending s. 400.993, F.S.; including specialty
28	clinics within provisions regarding unlicensed
29	clinics; providing penalties for unlicensed
30	operation of a specialty clinic; including
31	specialty clinics within provisions regarding 35
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1	verification of licensure; amending s.
2	400.9935, F.S.; including specialty clinics
3	within provisions regarding clinic
4	responsibilities; revising the responsibilities
5	of the medical director and the clinical
6	director; requiring all persons providing
7	health care services to individuals in a clinic
8	to comply with the licensure laws and rules
9	under which that person is licensed; providing
10	for a certificate of exemption from licensure
11	as a clinic to expire within a specified
12	period; providing for renewal of the
13	certificate of exemption; revising the
14	application procedures for a certificate of
15	exemption; providing grounds for the denial,
16	withdrawal, or emergency suspension of a
17	certificate of exemption by the Agency for
18	Health Care Administration; providing that it
19	is a third-degree felony for an applicant to
20	submit fraudulent or material and misleading
21	information to the agency; requiring a
22	specialty clinic to file an audited report with
23	the agency no less frequently than annually;
24	requiring a specialty clinic to maintain
25	compliance with part XIII of chapter 400, F.S.;
26	requiring health care clinics and specialty
27	clinics to display signs containing certain
28	information relating to insurance fraud;
29	authorizing compliance inspections by the
30	Division of Insurance Fraud; requiring clinics
31	to allow inspection access; amending s. 36
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## Bill No. CS for SB 2112

#### Barcode 941016

400.994, F.S.; granting the agency authority to institute injunctive proceedings against a specialty clinic; amending s. 400.995, F.S.; granting the agency authority to impose administrative penalties against a specialty clinic; creating s. 400.996, F.S.; creating a process whereby the agency receives, documents, and processes complaints about specialty clinics; requiring the agency to request that complaints regarding billing fraud by a specialty clinic be made by sworn affidavit; requiring the agency to refer to the Department of Financial Services, Office of Fiscal Integrity, any sworn affidavit asserting billing fraud by a specialty clinic; requiring the department to report findings regarding billing fraud by a specialty clinic to the agency; requiring the department to refer an investigation to prosecutorial authorities and provide investigative assistance under certain circumstances; providing that it is a first-degree misdemeanor to submit an affidavit asserting billing fraud by a specialty clinic which is without any factual basis; allowing the department to conduct unannounced reviews, investigations, analyses, and audits to investigate complaints of billing fraud by a specialty clinic; authorizing the department to enter upon the premises of a specialty clinic and immediately secure copies of certain documents; requiring a specialty clinic to 04/19/06 s2112c1d-cj14-b01

allow full a	nd immediate access to the premises
and records	of the clinic to a department
officer or en	mployee under s. 400.996, F.S.;
providing tha	at failure to provide such access
is a ground	for emergency suspension of the
license of the	ne specialty clinic; permitting the
agency to as:	sess a fee against a specialty
clinic equal	to the cost of conducting a
review, inve	stigation, analysis, or audit
performed by	the agency or the department;
providing tha	at all investigators designated by
the Chief Fir	nancial Officer to perform duties
under part X	III of chapter 400, F.S., and
certified und	der s. 943.1395, F.S., are law
enforcement o	officers of the state; amending s.
456.072, F.S	.; providing that intentionally
placing false	e information in an application for
a certificate	e of exemption from clinic
licensure con	nstitutes grounds for which
disciplinary	action may be taken; providing an
effective da	te.