

	CHAMBER ACTION		
Senate		House	
Comm: RCS	•		
4/15/2008	•		
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The Committee on Health Policy (Joyner) recommended the following **amendment**:

## Senate Amendment (with title amendment)

Delete everything after the enacting clause

and insert:

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Section 1. Section 395.301, Florida Statutes, is amended to read:

395.301 Itemized patient bill; form and content prescribed by the agency; hospital staffing disclosure.--

(1) A licensed facility not operated by the state shall notify each patient during admission and at discharge of his or her right to receive an itemized bill upon request. Within 7 days following the patient's discharge or release from a licensed facility not operated by the state, the licensed facility providing the service shall, upon request, submit to the patient, or to the patient's survivor or legal guardian as may be

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18 appropriate, an itemized statement detailing in language 19 comprehensible to an ordinary layperson the specific nature of 20 charges or expenses incurred by the patient, which in the initial 21 billing shall contain a statement of specific services received 22 and expenses incurred for such items of service, enumerating in 23 detail the constituent components of the services received within 24 each department of the licensed facility and including unit price 25 data on rates charged by the licensed facility, as prescribed by 26 the agency.

27 (2)(a) Each such statement submitted pursuant to this
28 section:

May not include charges of hospital-based physicians if
 billed separately.

31 2. May not include any generalized category of expenses32 such as "other" or "miscellaneous" or similar categories.

33 3. Shall list drugs by brand or generic name and not refer34 to drug code numbers when referring to drugs of any sort.

35 4. Shall specifically identify therapy treatment as to the
36 date, type, and length of treatment when therapy treatment is a
37 part of the statement.

38 (b) Any person receiving a statement pursuant to this
39 section shall be fully and accurately informed as to each charge
40 and service provided by the institution preparing the statement.

(3) On each itemized statement submitted pursuant to subsection (1) there shall appear the words "A FOR-PROFIT (or NOT-FOR-PROFIT or PUBLIC) HOSPITAL (or AMBULATORY SURGICAL CENTER) LICENSED BY THE STATE OF FLORIDA" or substantially similar words sufficient to identify clearly and plainly the ownership status of the licensed facility. Each itemized statement must prominently display the phone number of the

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48 medical facility's patient liaison who is responsible for 49 expediting the resolution of any billing dispute between the 50 patient, or his or her representative, and the billing 51 department.

52 (4) An itemized bill shall be provided once to the53 patient's physician at the physician's request, at no charge.

(5) In any billing for services subsequent to the initial billing for such services, the patient, or the patient's survivor or legal guardian, may elect, at his or her option, to receive a copy of the detailed statement of specific services received and expenses incurred for each such item of service as provided in subsection (1).

60 (6) No physician, dentist, podiatric physician, or licensed facility may add to the price charged by any third party except 61 for a service or handling charge representing a cost actually 62 incurred as an item of expense; however, the physician, dentist, 63 podiatric physician, or licensed facility is entitled to fair 64 65 compensation for all professional services rendered. The amount 66 of the service or handling charge, if any, shall be set forth clearly in the bill to the patient. 67

(7) Each licensed facility not operated by the state shall 68 69 provide, prior to provision of any nonemergency medical services, 70 a written good faith estimate of reasonably anticipated charges 71 for the facility to treat the patient's condition upon written 72 request of a prospective patient. The estimate shall be provided 73 to the prospective patient within 7 business days after the 74 receipt of the request. The estimate may be the average charges 75 for that diagnosis related group or the average charges for that 76 procedure. Upon request, the facility shall notify the patient of 77 any revision to the good faith estimate. Such estimate shall not

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78 preclude the actual charges from exceeding the estimate. The 79 facility shall place a notice in the reception area that such 80 information is available. Failure to provide the estimate within 81 the provisions established pursuant to this section shall result 82 in a fine of \$500 for each instance of the facility's failure to 83 provide the requested information.

(8) A licensed facility shall make available to a patient 84 all records necessary for verification of the accuracy of the 85 86 patient's bill within 30 business days after the request for such 87 records. The verification information must be made available in the facility's offices. Such records shall be available to the 88 89 patient prior to and after payment of the bill or claim. The 90 facility may not charge the patient for making such verification records available; however, the facility may charge its usual fee 91 for providing copies of records as specified in s. 395.3025. 92

93 (9) Each facility shall establish a method for reviewing 94 and responding to questions from patients concerning the 95 patient's itemized bill. Such response shall be provided within 96 30 days after the date a question is received. If the patient is 97 not satisfied with the response, the facility must provide the 98 patient with the address of the agency to which the issue may be 99 sent for review.

(10) Each licensed facility shall make available on its Internet website a link to the performance outcome and financial data that is published by the Agency for Health Care Administration pursuant to s. 408.05(3)(k). The facility shall place a notice in the reception area that the information is available electronically and the facility's Internet website address.



107	(11) An acute care hospital shall provide to any person,
108	within 48 hours after receiving a written request, a report of
109	the daily staffing level of the direct care nursing staff,
110	registered nurses, licensed practical nurses, and certified
111	nursing assistants in each patient care unit for each shift and
112	each day of the month preceding the request, the daily census by
113	patient care unit for each shift and each day of the month
114	preceding the request, and the projected schedule and anticipated
115	average daily census by patient care unit of the hospital for a
116	minimum period of 30 days following the date of the request.
117	Section 2. This act shall take effect July 1, 2008.
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120	And the title is amended as follows:
121	Delete everything before the enacting clause
122	and insert:
123	A bill to be entitled
124	An act relating to the staffing of health care facilities;
125	amending s. 395.301, F.S.; requiring acute care hospitals
126	to make information concerning staffing levels at the
127	hospital available to the public upon request; providing
128	an effective date.

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