



141570

LEGISLATIVE ACTION

Senate

House

.  
. .  
. .  
. .  
. .

Floor: WD/2R

03/06/2012 05:37 PM

---

Senator Bennett moved the following:

**Senate Amendment (with title amendment)**

Delete lines 512 - 581

and insert:

(1) REQUIRED BENEFITS.—~~An~~ Every insurance policy complying with the security requirements of s. 627.733 must ~~shall~~ provide personal injury protection to the named insured, relatives residing in the same household, persons operating the insured motor vehicle, passengers in the ~~such~~ motor vehicle, and other persons struck by the ~~such~~ motor vehicle and suffering bodily injury while not an occupant of a self-propelled vehicle, subject to ~~the provisions of~~ subsection (2) and paragraph (4) (e), to a limit of \$10,000 in medical and disability benefits



14 and \$5,000 in death benefits resulting from ~~for loss sustained~~  
15 ~~by any such person as a result of~~ bodily injury, sickness,  
16 disease, or death arising out of the ownership, maintenance, or  
17 use of a motor vehicle as follows:

18 (a) *Medical benefits.*—Eighty percent of all reasonable  
19 expenses for medically necessary medical, surgical, X-ray,  
20 dental, and rehabilitative services, including prosthetic  
21 devices, ~~and medically necessary ambulance, hospital, and~~  
22 nursing services, if the individual receives initial services  
23 and care pursuant to subparagraph 1. within 14 days after the  
24 motor vehicle accident. ~~However,~~ The medical benefits shall  
25 provide reimbursement only for: ~~such~~

26 1. Initial services and care that are lawfully provided,  
27 supervised, ordered, or prescribed by a physician licensed under  
28 chapter 458 or chapter 459, by a chiropractic physician licensed  
29 under chapter 460, or by a dentist licensed under chapter 466,  
30 ~~or a chiropractic physician licensed under chapter 460~~ or that  
31 are provided in a hospital or in a facility that owns, or is  
32 wholly owned by, a hospital. Initial services and care may also  
33 be provided by a person or entity licensed under part III of  
34 chapter 401 which provides emergency transportation and  
35 treatment.

36 2. Followup services and care consistent with the  
37 underlying medical diagnosis rendered pursuant to subparagraph  
38 1., which may be provided, supervised, ordered, or prescribed  
39 only by a physician licensed under chapter 458 or chapter 459, a  
40 chiropractic physician licensed under chapter 460, a dentist  
41 licensed under chapter 466, or, to the extent permitted by  
42 applicable law and under the supervision of such physician,



141570

43 osteopathic physician, chiropractic physician, or dentist, by a  
44 physician assistant licensed under chapter 458 or chapter 459 or  
45 an advanced registered nurse practitioner licensed under chapter  
46 464. Followup services and care may also be provided by any of  
47 the following persons or entities:

48 ~~a.1.~~ A hospital or ambulatory surgical center licensed  
49 under chapter 395.

50 ~~2. A person or entity licensed under ss. 401.2101-401.45~~  
51 ~~that provides emergency transportation and treatment.~~

52 ~~b.3.~~ An entity wholly owned by one or more physicians  
53 licensed under chapter 458 or chapter 459, chiropractic  
54 physicians licensed under chapter 460, or dentists licensed  
55 under chapter 466 or by such ~~practitioner or~~ practitioners and  
56 the spouse, parent, child, or sibling of such ~~that practitioner~~  
57 ~~or those~~ practitioners.

58 ~~c.4.~~ An entity that owns or is wholly owned, directly or  
59 indirectly, by a hospital or hospitals.

60 d. A physical therapist licensed under chapter 486.

61 ~~e.5.~~ A health care clinic licensed under part X of chapter  
62 400 which ~~ss. 400.990-400.995 that is:~~

63 ~~a.~~ accredited by the Joint Commission on Accreditation of  
64 Healthcare Organizations, the American Osteopathic Association,  
65 the Commission on Accreditation of Rehabilitation Facilities, or  
66 the Accreditation Association for Ambulatory Health Care, Inc., ~~+~~  
67 or

68 ~~b. A health care clinic that:~~

69 (I) Has a medical director licensed under chapter 458,  
70 chapter 459, or chapter 460;

71 (II) Has been continuously licensed for more than 3 years



72 or is a publicly traded corporation that issues securities  
73 traded on an exchange registered with the United States  
74 Securities and Exchange Commission as a national securities  
75 exchange; and

76 (III) Provides at least four of the following medical  
77 specialties:

78 (A) General medicine.

79 (B) Radiography.

80 (C) Orthopedic medicine.

81 (D) Physical medicine.

82 (E) Physical therapy.

83 (F) Physical rehabilitation.

84 (G) Prescribing or dispensing outpatient prescription  
85 medication.

86 (H) Laboratory services.

87 3. Reimbursement for services and care provided by each  
88 type of licensed medical provider authorized to render such  
89 services and care is limited to the lesser of 24 treatments or  
90 to services or care rendered within 12 weeks after the date of  
91 the initial treatment, unless the insurer authorizes additional  
92 services or care.

93 4. A physician licensed under chapter 458 or chapter 459, a  
94 chiropractic physician licensed under chapter 460, or a dentist  
95 licensed under chapter 466 who supervises services and care  
96 pursuant to this subsection must be on the premises where the  
97 services and care are being provided and the supervising  
98 physician must provide his or her medical license number and the  
99 times such treatment was rendered on all statements and bills  
100 for such services and care. A supervising physician who submits



141570

101 a false, misleading, or fraudulent claim for medical benefits  
102 provided pursuant to this paragraph commits insurance fraud  
103 pursuant to s. 817.234.

104 5. The Financial Services Commission shall adopt by rule  
105 the form that must be used by an insurer and a health care  
106 provider specified in sub-subparagraph 2.b., sub-subparagraph  
107 2.c., or sub-subparagraph 2.e. ~~subparagraph 3., subparagraph 4.,~~  
108 ~~or subparagraph 5.~~ to document that the health care provider  
109 meets the criteria of this paragraph, which rule must include a  
110 requirement for a sworn statement or affidavit.

111  
112 ===== T I T L E A M E N D M E N T =====

113 And the title is amended as follows:

114 Delete lines 45 - 47

115 and insert:

116 627.736, F.S.; revising the cap on benefits to provide  
117 that death benefits are in addition to medical and  
118 disability benefits; revising medical benefits;  
119 distinguishing between initial and followup services  
120 and specifying who may provide such services;  
121 requiring physicians who supervise services and care  
122 to be on the premises when supervised services are  
123 provided and to include their license number on all  
124 bills for services; providing that a physician who  
125 submits a fraudulent statement commits insurance  
126 fraud; requiring that an insurer