

By Senator Bean

4-01079-13

20131690__

1 A bill to be entitled
2 An act relating to volunteer health services; amending
3 s. 766.1115, F.S.; revising requirements for patient
4 referral under the "Access to Health Care Act";
5 eliminating a requirement that the governmental
6 contractor approve all followup or hospital care;
7 requiring the Department of Health to post specified
8 information online concerning volunteer providers;
9 permitting volunteer providers to earn continuing
10 education credit for participation in the program up
11 to a specified amount; deleting provisions requiring
12 the department to make specified rules concerning
13 methods for determination and approval of patient
14 eligibility and referral; providing an effective date.

15
16 Be It Enacted by the Legislature of the State of Florida:

17
18 Section 1. Subsections (10) and (11) of section 766.1115,
19 Florida Statutes, are renumbered as sections (11) and (12),
20 respectively, a new subsection (10) is added to that section,
21 and paragraphs (d), (f), and (g) of subsection (4) and present
22 subsections (8) and (10) of that section are amended to read:

23 766.1115 Health care providers; creation of agency
24 relationship with governmental contractors.-

25 (4) CONTRACT REQUIREMENTS.-A health care provider that
26 executes a contract with a governmental contractor to deliver
27 health care services on or after April 17, 1992, as an agent of
28 the governmental contractor is an agent for purposes of s.
29 768.28(9), while acting within the scope of duties under the

4-01079-13

20131690__

30 contract, if the contract complies with the requirements of this
31 section and regardless of whether the individual treated is
32 later found to be ineligible. A health care provider under
33 contract with the state may not be named as a defendant in any
34 action arising out of medical care or treatment provided on or
35 after April 17, 1992, under contracts entered into under this
36 section. The contract must provide that:

37 (d) Patient selection and initial referral may ~~must~~ be made
38 ~~solely~~ by the governmental contractor or the provider, ~~and the~~
39 ~~provider must accept all referred patients. However, the number~~
40 ~~of patients that must be accepted may be limited by the~~
41 ~~contract, and patients may not be transferred to the provider~~
42 ~~based on a violation of the antidumping provisions of the~~
43 ~~Omnibus Budget Reconciliation Act of 1989, the Omnibus Budget~~
44 ~~Reconciliation Act of 1990, or chapter 395.~~

45 ~~(f) Patient care, including any followup or hospital care,~~
46 ~~is subject to approval by the governmental contractor.~~

47 (f)(g) The provider is subject to supervision and regular
48 inspection by the governmental contractor.

49
50 A governmental contractor that is also a health care provider is
51 not required to enter into a contract under this section with
52 respect to the health care services delivered by its employees.

53 (8) REPORTING REPORT TO THE LEGISLATURE.—

54 (a) Annually, the department shall report to the President
55 of the Senate, the Speaker of the House of Representatives, and
56 the minority leaders and relevant substantive committee
57 chairpersons of both houses, summarizing the efficacy of access
58 and treatment outcomes with respect to providing health care

4-01079-13

20131690

59 services for low-income persons pursuant to this section.

60 (b) The department shall provide an online listing of all
61 providers volunteering under this program with their hours and
62 the number of patient visits each provided.

63 (10) CONTINUING EDUCATION CREDIT.—A provider may fulfill 1
64 hour of continuing education credit by performing 1 hour of
65 volunteer services to the indigent as provided in this section,
66 up to a maximum of eight credits per licensure period for that
67 provider.

68 (11)~~(10)~~ RULES.—The department shall adopt rules to
69 administer this section in a manner consistent with its purpose
70 to provide and facilitate access to appropriate, safe, and cost-
71 effective health care services and to maintain health care
72 quality. ~~The rules may include services to be provided and~~
73 ~~authorized procedures. Notwithstanding the requirements of~~
74 ~~paragraph (4) (d), the department shall adopt rules that specify~~
75 ~~required methods for determination and approval of patient~~
76 ~~eligibility and referral and the contractual conditions under~~
77 ~~which a health care provider may perform the patient eligibility~~
78 ~~and referral process on behalf of the department. These rules~~
79 ~~shall include, but not be limited to, the following~~
80 ~~requirements:~~

81 ~~(a) The provider must accept all patients referred by the~~
82 ~~department. However, the number of patients that must be~~
83 ~~accepted may be limited by the contract.~~

84 ~~(b) The provider shall comply with departmental rules~~
85 ~~regarding the determination and approval of patient eligibility~~
86 ~~and referral.~~

87 ~~(c) The provider shall complete training conducted by the~~

4-01079-13

20131690__

88 ~~department regarding compliance with the approved methods for~~
89 ~~determination and approval of patient eligibility and referral.~~

90 ~~(d) The department shall retain review and oversight~~
91 ~~authority of the patient eligibility and referral determination.~~

92 Section 2. This act shall take effect July 1, 2013.