

By the Committee on Health Policy; and Senator Bean

588-02805-13

20131690c1

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; providing that any rule adopted
12 by the department give providers the greatest
13 flexibility possible in order to serve eligible
14 patients; 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

588-02805-13

20131690c1

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

588-02805-13

20131690c1

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 by government contractors and
77 providers. The rules adopted by the department pursuant to this
78 subsection shall give providers the greatest flexibility
79 possible in order to serve eligible patients. The department
80 shall retain review and oversight authority of the patient
81 eligibility and referral determination. ~~and the contractual~~
82 ~~conditions under which a health care provider may perform the~~
83 ~~patient eligibility and referral process on behalf of the~~
84 ~~department. These rules shall include, but not be limited to,~~
85 ~~the following requirements:~~

86 ~~(a) The provider must accept all patients referred by the~~
87 ~~department. However, the number of patients that must be~~

588-02805-13

20131690c1

88 ~~accepted may be limited by the contract.~~

89 ~~(b) The provider shall comply with departmental rules~~
90 ~~regarding the determination and approval of patient eligibility~~
91 ~~and referral.~~

92 ~~(c) The provider shall complete training conducted by the~~
93 ~~department regarding compliance with the approved methods for~~
94 ~~determination and approval of patient eligibility and referral.~~

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

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