

HB 483

2013

1 A bill to be entitled

2 An act relating to workers' compensation; amending s.  
3 440.13, F.S.; prohibiting an employer or carrier from  
4 refusing to authorize a physician to treat an injured  
5 employee solely because the physician is a dispensing  
6 practitioner; providing for an authorized physician to  
7 dispense and fill prescriptions; prohibiting the  
8 Department of Financial Affairs, the employer, or the  
9 carrier from determining which pharmacy, pharmacist,  
10 or dispensing practitioner the claimant must use;  
11 revising provisions specifying reimbursement amounts  
12 for prescription medication; specifying the amount of  
13 credit a provider must give to a carrier or self-  
14 insured employer for certain repackaged or relabeled  
15 prescriptions; providing conditions for recalculation  
16 of the amount of provider rebate by the department;  
17 prohibiting a physician or the physician's assignee  
18 from holding an ownership interest in a licensed  
19 pharmaceutical repackaging entity and from setting  
20 prices for repackaged pharmaceuticals; providing an  
21 effective date.

22  
23 Be It Enacted by the Legislature of the State of Florida:

24  
25 Section 1. Paragraph (a) of subsection (3) of section  
26 440.13, Florida Statutes, is amended, paragraph (k) is added to  
27 that subsection, paragraphs (d) and (e) of subsection (12) are  
28 redesignated as paragraphs (c) and (d), respectively, present

29 paragraph (c) of that subsection is amended, subsections (15)  
 30 through (17) are renumbered as subsections (16) through (18),  
 31 respectively, and a new subsection (15) is added to that  
 32 section, to read:

33 440.13 Medical services and supplies; penalty for  
 34 violations; limitations.—

35 (3) PROVIDER ELIGIBILITY; AUTHORIZATION.—

36 (a) As a condition for ~~to~~ eligibility for payment under  
 37 this chapter, a health care provider who renders services must  
 38 be a certified health care provider and must receive  
 39 authorization from the carrier before providing treatment. This  
 40 paragraph does not apply to emergency care. An employer or a  
 41 carrier may not refuse to authorize a physician to treat an  
 42 injured employee solely because the physician is a dispensing  
 43 practitioner as defined in s. 465.0276. The department shall  
 44 adopt rules to administer ~~implement~~ the certification of health  
 45 care providers.

46 (k) If a physician who is a dispensing practitioner as  
 47 defined in s. 465.0276 receives authorization from an employer  
 48 or a carrier to treat a claimant pursuant to paragraph (a), the  
 49 physician may dispense and fill prescriptions for medicines  
 50 under this chapter. For purposes of dispensing and filling  
 51 prescriptions for medicines, the department, employer, or  
 52 carrier, or an agent or representative of the department,  
 53 employer, or carrier, may not determine which pharmacy,  
 54 pharmacist, or dispensing practitioner the claimant must use.

55 (12) CREATION OF THREE-MEMBER PANEL; GUIDES OF MAXIMUM  
 56 REIMBURSEMENT ALLOWANCES.—

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57 ~~(c) As to reimbursement for a prescription medication, the~~  
58 ~~reimbursement amount for a prescription shall be the average~~  
59 ~~wholesale price plus \$4.18 for the dispensing fee, except where~~  
60 ~~the carrier has contracted for a lower amount. Fees for~~  
61 ~~pharmaceuticals and pharmaceutical services shall be~~  
62 ~~reimbursable at the applicable fee schedule amount. Where the~~  
63 ~~employer or carrier has contracted for such services and the~~  
64 ~~employee elects to obtain them through a provider not a party to~~  
65 ~~the contract, the carrier shall reimburse at the schedule,~~  
66 ~~negotiated, or contract price, whichever is lower. No such~~  
67 ~~contract shall rely on a provider that is not reasonably~~  
68 ~~accessible to the employee.~~

69 (15) REIMBURSEMENT FOR PRESCRIPTION MEDICATION.—The  
70 reimbursement amount for prescription medication shall be the  
71 average wholesale price plus \$4.18 for the dispensing fee,  
72 unless the carrier and the provider seeking reimbursement have  
73 directly contracted with each other for a lower reimbursement  
74 amount.

75 (a) If a prescription has been repackaged or relabeled,  
76 the provider shall give a \$15 credit to the insurance carrier or  
77 self-insured employer for each prescription that costs more than  
78 \$25. The credit shall be reflected in the Explanation of Bill  
79 Review provided by the carrier or employer. The credit does not  
80 apply if the carrier and the provider seeking reimbursement have  
81 directly contracted with each other for a lower reimbursement  
82 amount. Any credit to a self-insured employer shall be directly  
83 deposited to the self-insurance fund of the employer. Beginning  
84 July 1, 2015, and every 2 years thereafter, the department shall

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85 recalculate the amount of the provider rebate based on actual  
86 claim data submitted to the department for the previous 2 years.

87 (b) A physician or the physician's assignee may not hold  
88 an ownership interest in a licensed pharmaceutical repackaging  
89 entity and may not set or cause to be set a repackaged  
90 pharmaceutical average wholesale price.

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