CS for SB 1862

By the Committee on Rules; and Senator Broxson

	595-03995-18 20181862c1	
1	A bill to be entitled	
2	An act relating to the Physician Fee Sharing Task	
3	Force; creating s. 456.0541, F.S.; establishing the	
4	Physician Fee Sharing Task Force within the Department	
5	of Health; providing for duties, membership, and	
6	meetings of the task force; requiring a report to the	
7	Governor and Legislature by a specified date;	
8	providing for expiration of the task force; providing	
9	an effective date.	
10		
11	Be It Enacted by the Legislature of the State of Florida:	
12		
13	Section 1. Section 456.0541, Florida Statutes is created to	
14	read:	
15	456.0541 Physician Fee Sharing Task Force.—	
16	(1) The Physician Fee Sharing Task Force is created within	
17	the department. The department shall use existing and available	
18	8 resources to administer and support the activities of the task	
19	force under this section.	
20	(2) Members of the task force shall serve without	
21	compensation and are not entitled to reimbursement for per diem	
22	or travel expenses. The task force shall consist, at a minimum,	
23	of the following members:	
24	(a) The State Surgeon General or his or her designee, who	
25	shall serve as the chair of the task force.	
26	(b) The Secretary of Health Care Administration or his or	
27	her designee.	
28	(c) The Attorney General or his or her designee.	
29	(d) Two members of the Legislature appointed by the	

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30 Governor. 31 (e) Two members of the Senate appointed by the President of 32 the Senate. 33 (f) Two members of the House of Representatives appointed 34 by the Speaker of the House of Representatives. 35 (g) Two representatives of hospitals or facilities licensed 36 under chapter 395, who each regularly deal with health care fraud and abuse matters, particularly those relating to the 37 federal False Claims Act, the federal Ethics in Patient 38 Referrals Act of 1989, and anti-kickback issues, appointed by 39 40 the Secretary of Health Care Administration. 41 (h) One general counsel of a health insurer or his or her 42 designee, who is familiar with health care fraud and abuse 43 matters, particularly those relating to the federal False Claims 44 Act, federal Ethics in Patient Referrals Act of 1989, and anti-45 kickback issues, appointed by the Secretary of Health Care 46 Administration. 47 (i) Five health care practitioners, each of whom practices in a different area of medicine, appointed by the State Surgeon 48 49 General. 50 (j) One representative of an organization that represents 51 health care practitioners who is familiar with health care fraud and abuse matters, particularly those relating to the federal 52 53 False Claims Act, federal Ethics in Patient Referrals Act of 1989, and anti-kickback issues, appointed by the President of 54 55 the Senate. 56 (k) One representative of The Florida Bar, whose practice 57 area primarily involves health care fraud and abuse matters, 58 particularly those relating to the federal False Claims Act,

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59	federal Ethics in Patient Referrals Act of 1989, and anti-
60	kickback issues, appointed by the Executive Director of The
61	Florida Bar.
62	(1) Two representatives from companies whose primary
63	business function is the development and deployment of a
64	certified electronic health record, appointed by the Speaker of
65	the House of Representatives.
66	(m) Two representatives from companies whose primary
67	business function is the development and deployment of health
68	information technology, such as population health or data
69	analytics, which is not a certified electronic health record,
70	appointed by the President of the Senate.
71	(n) Two representatives from a company whose primary
72	business function is the development and deployment of smart
73	medical devices, such as remote patient monitoring, appointed by
74	the Speaker of the House of Representatives.
75	(o) One representative from an investment company whose
76	investment portfolio is comprised of at least 20 percent in
77	health information technology investments, appointed by the
78	President of the Senate.
79	(3) The task force shall develop and evaluate policy
80	proposals to address barriers to innovation and modernization of
81	provider payment models created by the federal Ethics in Patient
82	Referrals Act of 1989, the Florida Patient Self-Referral Act of
83	1992, federal and state anti-kickback laws, and the state
84	patient brokering law, including policy proposals for:
85	(a) Implementing and maintaining alternative payment
86	models.
87	(b) Increasing or extending existing safe harbor provisions

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88	to include physician practice groups.		
89	(c) Reforming the liability standard for violations.		
90	(4) The task force shall convene its first meeting by June		
91	1 1, 2018, and shall meet as often as necessary to fulfill its		
92	2 responsibilities under this section. Meetings may be conducted		
93	in person, by teleconference, or by other electronic means.		
94	(5) The task force shall submit a report by December 1,		
95	2018, to the Governor, the President of the Senate, and the		
96	Speaker of the House of Representatives which includes its		
97	findings, conclusions, and recommendations.		
98	(6) This section expires January 1, 2019.		
99	99 Section 2. This act shall take effect upon becoming a law.		

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