HOUSE AMENDMENT

Bill No. HB 913

Amendment No. ____ (for drafter's use only) CHAMBER ACTION Senate House 1 2 3 4 5 ORIGINAL STAMP BELOW 6 7 8 9 10 11 Representative(s) Casey offered the following: 12 13 Amendment (with title amendment) Remove from the bill: Everything after the enacting clause 14 15 and insert in lieu thereof: 16 17 Section 1. Subsections (4) through (10) of section 641.51, Florida Statutes, are redesignated as subsections (5) 18 19 through (11), respectively, and a new subsection (4) is added 20 to said section to read: 21 641.51 Quality assurance program; second medical 22 opinion requirement. --23 (4) The organization shall ensure that only a 24 physician licensed under chapter 458 or chapter 459 or an 25 allopathic or osteopathic physician with an active, 26 unencumbered license in another state with similar licensing 27 requirements may render an adverse determination regarding a 28 service provided by a physician licensed in this state. The 29 organization shall submit to the treating provider and the 30 subscriber written notification regarding the organization's 31 adverse determination within 2 working days after the 1

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subscriber or provider is notified of the adverse 1 2 determination. The written notification must include the 3 utilization review criteria or benefits provisions used in the 4 adverse determination, identify the physician who rendered the adverse determination, and be signed by an authorized 5 6 representative of the organization or the physician who 7 rendered the adverse determination. The organization must include with the notification of an adverse determination 8 9 information concerning the appeal process for adverse 10 determinations. 11 Section 2. This act shall take effect July 1, 2000. 12 13 14 15 And the title is amended as follows: 16 remove from the title of the bill: everything before the 17 enacting clause 18 19 and insert in lieu thereof: A bill to be entitled 20 21 An act relating to adverse determinations; 22 amending s. 641.51, F.S., relating to quality assurance program requirements for certain 23 24 managed care organizations; allowing the 25 rendering of adverse determinations by physicians licensed in Florida or states with 26 27 similar requirements; requiring the submission of facts and documentation pertaining to 28 rendered adverse determinations; providing 29 30 timeframe for organizations to submit facts and 31 documentation to providers and subscribers in 2

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1	writing; requiring an authorized representative
2	to sign the notification; providing an
3	effective date.
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