House



LEGISLATIVE ACTION

Senate		
Comm: WD		
03/10/2021		

The Committee on Judiciary (Rouson) recommended the following: Senate Amendment (with title amendment) Delete everything after the enacting clause and insert: Section 1. Section 768.755, Florida Statutes, is created to read: <u>768.755 Damages recoverable for costs of past health care</u> <u>services, procedures, or equipment; evidence of usual and</u> <u>customary rates; applicability.-</u> <u>(1) As used in this section, the term "charge benchmarks,"</u> for particular health care services, procedures, or equipment,

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12	means the value, at a specified percentile rank within a range
13	of benchmarks, which corresponds with the distribution of the
14	full, nondiscounted standard rates charged by health care
15	providers in the same or a similar specialty in the same
16	geographical area under the current official code for such
17	services, procedures, or equipment provided out-of-network or to
18	uninsured individuals.
19	(2) In a personal injury or wrongful death action to which
20	this part applies, for any claim of damages for the costs of
21	health care services, procedures, or equipment provided to a
22	claimant which are unpaid and remain due and payable, evidence
23	of the usual and customary rates for such services, procedures,
24	or equipment must be introduced at trial as follows:
25	(a) If the claimant has coverage for such services,
26	procedures, or equipment from a governmental program but, in
27	lieu of such program coverage, chooses for such services,
28	procedures, or equipment to be provided by a health care
29	provider who contractually agrees to defer payment until
30	recovery from the claimant's damages award or settlement,
31	evidence must be introduced at trial of the government program's
32	usual and customary rates for such services, procedures, or
33	equipment at the 85th percentile rank of the charge benchmarks
34	as reported in the benchmarking database maintained by FAIR
35	Health, Inc.
36	(b) If the claimant has coverage for such services,
37	procedures, or equipment from a commercial insurance carrier or
38	under a plan self-funded by the claimant's employer but, in lieu
39	of such insurance coverage, chooses for such services,
40	procedures, or equipment to be provided by a health care

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41	provider who contractually agrees to defer payment until		
42	recovery from the claimant's damages award or settlement,		
43	evidence must be introduced at trial of the usual and customary		
44	rates for such services, procedures, or equipment at the 85th		
45	percentile rank of the charge benchmarks as reported in the		
46	benchmarking database maintained by FAIR Health, Inc.		
47	(c) If the claimant does not have coverage for such		
48	services, procedures, or equipment, evidence must be introduced		
49	at trial of the usual and customary rates for such services,		
50	procedures, or equipment at the 85th percentile rank of the		
51	charge benchmarks as reported in the benchmarking database		
52	maintained by FAIR Health, Inc.		
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54	The usual and customary rates required to be introduced pursuant		
55	to this subsection are presumed to be reasonable rates.		
56	Section 2. This act shall take effect July 1, 2021.		
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59	And the title is amended as follows:		
60	Delete everything before the enacting clause		
61	and insert:		
62	A bill to be entitled		
63	An act relating to medical expenses; creating s.		
64	768.755, F.S.; defining the term "charge benchmarks";		
65	requiring that evidence of the usual and customary		
66	rates for certain services, procedures, or equipment		
67	be introduced at trial in a specified manner;		
68	specifying that such usual and customary rates are		
69	presumed to be reasonable rates; providing an		

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effective date.