HB 1299 2023

A bill to be entitled

An act relating to payments for health care providers and surgical procedures under workers' compensation; amending s. 440.13, F.S.; increasing the maximum amounts of certain witness fees related to workers' compensation cases; increasing the maximum reimbursements for physicians and surgical procedures under workers' compensation; providing an effective date.

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

- Section 1. Subsection (10) and paragraph (b) of subsection (12) of section 440.13, Florida Statutes, are amended to read:

  440.13 Medical services and supplies; penalty for violations; limitations.—
- (10) WITNESS FEES.—Any health care provider who gives a deposition shall be allowed a witness fee. The amount charged by the witness may not exceed \$300 \$200 per hour. An expert witness who has never provided direct professional services to a party but has merely reviewed medical records and provided an expert opinion or has provided only direct professional services that were unrelated to the workers' compensation case may not be allowed a witness fee in excess of \$300 \$200 per day.
  - (12) CREATION OF THREE-MEMBER PANEL; GUIDES OF MAXIMUM

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CODING: Words stricken are deletions; words underlined are additions.

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## REIMBURSEMENT ALLOWANCES.-

- (b) It is the intent of the Legislature to increase the schedule of maximum reimbursement allowances for selected physicians effective January 1, 2004, and to pay for the increases through reductions in payments to hospitals. Revisions developed pursuant to this subsection are limited to the following:
- 1. Payments for outpatient physical, occupational, and speech therapy provided by hospitals shall be reduced to the schedule of maximum reimbursement allowances for these services which applies to nonhospital providers.
- 2. Payments for scheduled outpatient nonemergency radiological and clinical laboratory services that are not provided in conjunction with a surgical procedure shall be reduced to the schedule of maximum reimbursement allowances for these services which applies to nonhospital providers.
- 3. Outpatient reimbursement for scheduled surgeries shall be reduced from 75 percent of charges to 60 percent of charges.
- 4. Maximum reimbursement for a physician licensed under chapter 458 or chapter 459 shall be increased to 200 110 percent of the reimbursement allowed by Medicare, using appropriate codes and modifiers or the medical reimbursement level adopted by the three-member panel as of January 1, 2003, whichever is greater.
  - 5. Maximum reimbursement for surgical procedures shall be

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increased to 200 140 percent of the reimbursement allowed by Medicare or the medical reimbursement level adopted by the three-member panel as of January 1, 2003, whichever is greater.

The department, as requested, shall provide data to the panel, including, but not limited to, utilization trends in the workers' compensation health care delivery system. The department shall provide the panel with an annual report regarding the resolution of medical reimbursement disputes and any actions pursuant to subsection (8). The department shall provide administrative support and service to the panel to the extent requested by the panel. For prescription medication purchased under the requirements of this subsection, a dispensing practitioner shall not possess such medication unless payment has been made by the practitioner, the practitioner's professional practice, or the practitioner's practice management company or employer to the supplying manufacturer, wholesaler, distributor, or drug repackager within 60 days of the dispensing practitioner taking possession of that medication.

Section 2. This act shall take effect July 1, 2023.

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