The Senate Committee on Health and Human Services offered the following substitute to SB 352:

A BILL TO BE ENTITLED AN ACT

1 To amend Article 1 of Chapter 1 of Title 31 of the Official Code of Georgia Annotated, 2 relating to general provisions relative to health, so as to prohibit patient brokering; to provide 3 for definitions; to provide for exceptions; to provide for penalties; to create an executive 4 director of substance abuse, addiction, and related disorders; to provide for appointment; to 5 provide for qualifications; to establish the Commission on Substance Abuse and Recovery; 6 to provide for membership; to provide for duties; to amend Chapter 1 of Title 33 of the 7 Official Code of Georgia Annotated, relating to general provisions relative to insurance, so 8 as to provide for a fraudulent insurance act for the excessive, high-tech, or fraudulent drug 9 testing of certain individuals; to provide for investigation by the Commissioner; to provide 10 for penalties; to provide for related matters; to repeal conflicting laws; and for other 11 purposes.

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BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

13	SECTION 1.
14	Article 1 of Chapter 1 of Title 31 of the Official Code of Georgia Annotated, relating to
15	general provisions relative to health, is amended by adding a new Code section to read as
16	follows:
17	<u>"31-1-16.</u>
18	(a) As used in this Code section, the term:
19	(1) 'Health care provider or health care facility' means:
20	(A) Any person licensed under Chapter 9, 10A, 11, 11A, 26, 28, 30, 33, 34, 35, 39,
21	or 44 of Title 43 or any hospital, nursing home, home health agency, institution, or
22	medical facility licensed or defined under Chapter 7 of Title 31. The term shall also
23	include any corporation, professional corporation, partnership, limited liability
24	company, limited liability partnership, authority, or other entity composed of such
25	health care providers;

26	(B) Any state owned or state operated hospital, community mental health center, or
27	other facility utilized for the diagnosis, care, treatment, or hospitalization of persons
28	who are alcoholics, drug dependent individuals, or drug abusers and any other hospital
29	or facility within the State of Georgia approved for such purposes by the Department
30	of Behavioral Health and Developmental Disabilities;
31	(C) Community mental health center as defined in Code Section 37-7-1;
32	(D) Any Medicaid provider as defined in Code Section 49-4-146.1;
33	(E) A state or local health department;
34	(F) Any community service provider contracting with any state entity to furnish
35	alcohol, drug abuse, or mental health services; and
36	(G) Any substance abuse service provider licensed under Chapter 5 of Title 26.
37	(2) 'Health care provider network entity' means a corporation, partnership, or limited
38	liability company owned or operated by two or more health care providers or health care
39	facilities and organized for the purpose of entering into agreements with health insurers,
40	health care purchasing groups, or Medicaid or medicare.
41	(3) 'Health insurer' means an accident and sickness insurer, health care corporation,
42	health maintenance organization, provider sponsored health care corporation, or any
43	similar entity regulated by the Commissioner of Insurance.
44	(b) It shall be unlawful for any person, including any health care provider or health care
45	facility, to:
46	(1) Offer to pay a commission, benefit, bonus, rebate, kickback, or bribe, directly or
47	indirectly, in cash or in kind, or engage in any split-fee arrangement, in any form, to
48	induce the referral of a patient or patronage to or from a health care provider or health
49	care facility;
50	(2) Solicit or receive a commission, benefit, bonus, rebate, kickback, or bribe, directly
51	or indirectly, in cash or in kind, or engage in any split-fee arrangement, in any form, in
52	return for the referral of a patient or patronage to or from a health care provider or health
53	care facility;
54	(3) Solicit or receive a commission, benefit, bonus, rebate, kickback, or bribe, directly
55	or indirectly, in cash or in kind, or engage in any split-fee arrangement, in any form, in
56	return for the acceptance or acknowledgment of treatment from a health care provider or
57	health care facility; or
58	(4) Aid, abet, advise, or otherwise participate in the conduct prohibited by this
59	subsection.
60	(c) This Code section shall not apply to:

61	(1) Any discount, payment, waiver of payment, or payment practice not prohibited by 42
62	U.S.C. Section 1320a-7b(b) or any fraternal benefit society providing health benefits to
63	its members as authorized pursuant to Chapter 15 of Title 33;
64	(2) Any payment, compensation, or financial arrangement within a group practice as
65	defined in Code Section 43-1B-3, provided such payment, compensation, or arrangement
66	is not to or from persons who are not members of the group practice;
67	(3) Payments to a health care provider or health care facility for professional consultation
68	services;
69	(4) Commissions, fees, or other remuneration lawfully paid to insurance agents as
70	provided under Title 33;
71	(5) Payments by a health insurer who reimburses, provides, offers to provide, or
72	administers health, mental health, or substance abuse goods or services under a health
73	<u>benefit plan;</u>
74	(6) Payments to or by a health care provider or health care facility or a health care
75	provider network entity that has contracted with a health insurer, a health care purchasing
76	group, or the medicare or Medicaid program to provide health, mental health, or
77	substance abuse goods or services under a health benefit plan when such payments are
78	for goods or services under the plan. However, nothing in this Code section affects
79	whether a health care provider network entity is an insurer required to be licensed under
80	<u>Title 33;</u>
81	(7) Insurance advertising gifts lawfully permitted under Code Section 33-6-4; or
82	(8) Payments by a health care provider or health care facility to a health, mental health,
83	or substance abuse information service that provides information upon request and
84	without charge to consumers about providers of health care goods or services to enable
85	consumers to select appropriate providers or facilities, provided that such information
86	service:
87	(A) Does not attempt through its standard questions for solicitation of consumer
88	criteria or through any other means to steer or lead a consumer to select or consider
89	selection of a particular health care provider or health care facility;
90	(B) Does not provide or represent itself as providing diagnostic or counseling services
91	or assessments of illness or injury and does not make any promises of cure or
92	guarantees of treatment;
93	(C) Does not provide or arrange for transportation of a consumer to or from the
94	location of a health care provider or health care facility; and
95	(D) Charges and collects fees from a health care provider or health care facility
96	participating in its services that are set in advance, are consistent with the fair market
97	value for those information services, and are not based on the potential value of a

98 patient or patients to a health care provider or health care facility or of the goods or 99 services provided by the health care provider or health care facility. 100 (d)(1) Any person, including an officer, partner, agent, attorney, or other representative 101 of a firm, joint venture, partnership, business trust, syndicate, corporation, or other 102 business entity, who violates any provision of this Code section, when the prohibited 103 conduct involves less than ten patients, commits a felony and, upon conviction thereof, 104 shall be punished by imprisonment for not more than five years and by a fine of 105 \$50,000.00 per violation. 106 (2) Any person, including an officer, partner, agent, attorney, or other representative of 107 a firm, joint venture, partnership, business trust, syndicate, corporation, or other business 108 entity, who violates any provision of this Code section, when the prohibited conduct 109 involves ten or more patients but fewer than 20, commits a felony and, upon conviction 110 thereof, shall be punished by imprisonment for not more than ten years and by a fine of 111 not more than \$100,000.00 per violation. 112 (3) Any person, including an officer, partner, agent, attorney, or other representative of 113 a firm, joint venture, partnership, business trust, syndicate, corporation, or other business 114 entity, who violates any provision of this Code section, when the prohibited conduct 115 involves 20 or more patients, commits a felony and, upon conviction thereof, shall be 116 punished by imprisonment for 20 years and by a fine of not more than \$500,000.00 per 117 violation. 118 (e) Notwithstanding any other law to the contrary, the Attorney General or district attorney 119 of the judicial circuit in which any part of the violation occurred may maintain an action 120 for injunctive relief or other process to enforce the provisions of this Code section. 121 (f) The party bringing an action under this Code section may recover reasonable expenses 122 in obtaining injunctive relief, including, but not limited to, investigative costs, court costs, reasonable attorney's fees, witness costs, and deposition expenses. 123 124 (g) The provisions of this Code section are in addition to any other civil, administrative, 125 or criminal actions provided by law and may be imposed against both corporate and 126 individual defendants." 127 **SECTION 2.** 128 Said article is further amended by adding a new Code section to read as follows: 129 ″<u>31-1-17.</u> 130 (a) The Governor shall appoint an executive director of substance abuse, addiction, and 131 related disorders who shall serve at the pleasure of the Governor. The executive director 132 shall be an employee of the Governor's Office of Planning and Budget and shall report 133 directly to the Governor.

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134	(b) The executive director shall have a college degree and at least one of the following
135	qualifications:
136	(1) Educational background or work experience involving vulnerable populations
137	relative to substance abuse, addiction, and related disorders with the ability to assess the
138	impact of untreated mental illness and substance abuse disorders on state budgets,
139	hospitals, emergency rooms, jails, prisons, law enforcement agencies, educational
140	institutions, and related institutions and services;
141	(2) Work experience in a setting dealing with treatment and delivery of services for the
142	safety or well-being of children and adults affected by substance abuse, addiction, and
143	related disorders; or
144	(3) Experience working in or managing a complex, multidisciplinary business or
145	government agency.
146	(c)(1) There is established the Commission on Substance Abuse and Recovery. The
147	purpose of the commission is to create a coordinated and unified effort among state and
148	local agencies to confront the state-wide addiction and substance abuse crisis.
149	(2) The executive director shall oversee the commission and be a voting member thereof.
150	(3) The commission shall consist of 15 members as follows:
151	(A) The commissioner of behavioral health and developmental disabilities;
152	(B) The commissioner of public health;
153	(C) The commissioner of community health;
154	(D) The commissioner of human services;
155	(E) The State School Superintendent;
156	(F) The commissioner of public safety;
157	(G) The Commissioner of Insurance;
158	(H) The Attorney General;
159	(I) The director of the Georgia Bureau of Investigation;
160	(J) The commissioner of community supervision;
161	(K) One representative of the judicial branch representing the accountability courts to
162	be appointed by the Governor;
163	(L) Two representatives from the advocacy community to be appointed by the
164	Governor:
165	(M) One member from the House of Representative to be appointed by the Speaker of
166	the House of Representatives; and
167	(N) One member from the Senate to be appointed by the Lieutenant Governor.
168	(4) The executive director shall be the chairperson of the commission. The commission
169	may elect such other officers and establish committees as it deems appropriate.

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170 (5) Meetings of the commission shall be held quarterly, or more frequently, on the call 171 of the chairperson. Meetings of the commission shall be held with not less than five days' 172 public notice for regular meetings and with such notice as the bylaws may prescribe for 173 special meetings. Each member shall be given written notice of all meetings. All meetings of the commission shall be subject to the provisions of Chapter 14 of Title 50. 174 175 Minutes or transcripts shall be kept of all meetings of the commission and shall include 176 a record of the votes of each member, specifying the yea or nay vote or the absence of 177 each member, on all questions and matters coming before the commission. No member 178 may abstain from a vote other than for reasons constituting disqualification to the 179 satisfaction of a majority of a quorum of the commission on a recorded vote. No member 180 of the commission shall be represented by a delegate or agent. 181 (6) Members shall serve without compensation, although each member of the 182 commission shall be reimbursed for actual expenses incurred in the performance of his 183 or her duties from funds available to the commission; provided, however, that any 184 legislative member shall receive the allowances authorized by law for legislative 185 members of interim legislative committees and any members who are state employees 186 shall be reimbursed for expenses incurred by them in the same manner as they are 187 reimbursed for expenses in their capacities as state employees. 188 (d) The commission shall be vested with the following functions and authority: 189 (1) To coordinate overdose data and statistics between the prescription drug monitoring 190 program data base, the Georgia Bureau of Investigation, the Federal Bureau of 191 Investigation, and local governments; 192 (2) To consult on the implementation of the department's strategic plan on the opioid 193 crisis; 194 (3) To consult with the Attorney General's task force on the opioid crisis; 195 (4) To work with advocacy groups to coordinate public education forums with the 196 department and the Department of Behavioral Health and Developmental Disabilities; 197 (5) To consult with and provide recommendations to the Governor on a potential 198 Medicaid waiver related to opioid abuse; 199 (6) To create a block grant program based on sliding scale needs that is strategically 200 based on statistics and the needs of communities. The commission shall be responsible 201 for accepting, reviewing, and making recommendations to the department on applicant 202 <u>awards;</u> 203 (7) To consult with the Board of Education and the Department of Education to 204 formulate strategies for a uniform state-wide network of education and substance abuse 205 and addiction prevention pursuant to subsection (c) of Code Section 20-2-142;

206	(8) To develop a prevention education plan and to increase funding for local-level
207	substance misuse prevention services in public schools, for law enforcement agencies,
208	and for community organizations; and
209	(9) To expand access to appropriate prevention, treatment, and recovery support
210	services."
211	SECTION 3.
212	Chapter 1 of Title 33 of the Official Code of Georgia Annotated, relating to general
213	provisions relative to insurance, is amended by adding a new Code section to read as follows:
214	" <u>33-1-16.1.</u>
215	(a) As used in this Code section, the term:
216	(1) 'High-tech drug testing' means when billing for drug tests is not limited and tests are
217	ordered for a number of different substances whereby the health benefit plan is billed
218	separately for each substance tested.
219	(2) 'Person' means an individual, any person who provides coverage under Code
220	Section 33-1-14, and any owner, manager, medical practitioner, employee, or any other
221	party involved in the fraudulent act.
222	(b)(1) For purposes of this Code section, a person commits a 'fraudulent insurance act'
223	if he or she knowingly and with intent to defraud presents, causes to be presented, or
224	prepares with knowledge or belief that it will be presented, to or by an insurer, broker,
225	or any agent thereof, or directly or indirectly to an insured or uninsured patient a bill for
226	excessive, high-tech, or fraudulent drug testing in the treatment of the elderly, the
227	disabled, or any individual affected by pain, substance abuse, addiction, or any related
228	disorder. Such person shall include, but shall not be limited to, any person who provides
229	coverage in this state under subsection (a) of Code Section 33-1-14.
230	(2) Such drug testing shall include, but shall not be limited to:
231	(A) Upcoding that results in billing for more expensive services or procedures than
232	were actually provided or performed;
233	(B) Unbundling of such billing whereby drug tests from a single blood sample that
234	detect a variety of narcotics is separated into multiple tests and billed separately;
235	(C) Billing an individual for multiple co-pay amounts;
236	(D) Billing an individual for services that are covered by such individual's health
237	<u>benefit plan;</u>
238	(E) Billing for drug testing that was not performed; or
239	(F) Billing for excessive numbers of drug tests that are found to be medically

240 <u>unnecessary for the treatment pursuant to this Code section.</u>

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241	(c) If, by his or her own inquiries or as a result of information received, the Commissioner
242	has reason to believe that a person has engaged in or is engaging in a fraudulent insurance
243	act under this Code section, the Commissioner shall have all the powers and duties
244	pursuant to Code Section 33-1-16 to investigate such matter.
245	(d) A natural person convicted of a violation of this Code section shall be guilty of a
246	felony and shall be punished by imprisonment for not less than ten years nor more than 20
247	years, or by a fine of not more than \$25,000.00 per violation, or both.
248	(e) This Code section shall not supersede any investigation audit which involves fraud,
249	willful misrepresentation, or abuse under Article 7 of Chapter 4 of Title 49 or any other
250	statutory provisions which authorize investigation relating to insurance."

SECTION 4.

All laws and parts of laws in conflict with this Act are repealed.