HOUSE AMENDMENT

Bill No. CS/CS/CS/SB 752 (2010)

Amendment No.
CHAMBER ACTION
Senate House
• •
Representative Bogdanoff offered the following:
Amendment (with title amendment)
Between lines 1741 and 1742, insert:
Section 18. Subsection (9) of section 627.736, Florida
Statutes, is amended to read:
627.736 Required personal injury protection benefits;
exclusions; priority; claims
(9) An insurer may negotiate and enter into contracts with
licensed health care providers for the benefits described in
this section, referred to in this section as "preferred
providers," which shall include health care providers licensed
under chapters 458, 459, 460, 461, and 463. The insurer may
provide an option to an insured to use a preferred provider at
the time of purchase of the policy for personal injury
protection benefits, if the requirements of this subsection are
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Amendment No. 17 met. If the insured elects to use a provider who is not a preferred provider, whether the insured purchased a preferred 18 19 provider policy or a nonpreferred provider policy, the medical 20 benefits provided by the insurer shall be as required by this 21 section. If the insured elects to use a provider who is a preferred provider, the insurer may pay medical benefits in 22 23 excess of the benefits required by this section and may waive or 24 lower the amount of any deductible that applies to such medical 25 benefits. Alternatively, or in addition to such benefits or 26 waiver, the insurer may provide an actuarially appropriate 27 premium discount as specified in an approved rate filing to a 28 policyholder who selects the preferred provider option. If the 29 preferred provider option provides for a premium discount, the policy may provide that charges for nonemergency services 30 31 provided within this state are payable only if provided by members of the preferred provider network, except if there is no 32 33 member of the preferred provider network located within 15 miles 34 of the insured's place of residence whose scope of practice 35 includes the required services. If the insurer offers a 36 preferred provider policy to a policyholder or applicant, it must also offer a nonpreferred provider policy. The insurer 37 38 shall provide each policyholder with a current roster of 39 preferred providers in the county in which the insured resides at the time of purchase of such policy, and shall make such list 40 available for public inspection during regular business hours at 41 the principal office of the insurer within the state. The 42 43 insurer may contract with a health insurer for the right to use 44 an existing preferred provider network to implement the 584895 Approved For Filing: 4/28/2010 10:41:18 AM

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45	preferred provider option. If the insurers enter into such
46	contract, the health insurer must notify all members of the
47	network and provide network members with an opportunity to opt
48	out of the network for purposes of treatment or services under
49	this subsection. Any other arrangement is subject to the
50	approval of the Office of Insurance Regulation.
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54	TITLE AMENDMENT
55	Remove line 102 and insert:
56	manufacturer permits; amending s. 627.736, F.S.; revising
57	provisions relating to preferred provider arrangements to
58	provide for premium discounts; providing an effective date.
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