By Senator Hays

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20-01162-11 20111068

A bill to be entitled An act relating to the Department of Financial Services; amending s. 20.121, F.S.; revising duties of the Division of Consumer Services; amending ss. 284.01 and 284.36, F.S.; revising criteria for premiums charged to agencies and departments for purposes of the State Risk Management Trust Fund; amending s. 284.42, F.S.; revising reporting requirements for the Department of Financial Services and the Department of Management Services on the state insurance program; requiring the Division of Risk Management to analyze and report on certain agency return-to-work programs and activities; amending s. 284.50, F.S.; requiring certain agencies to establish and maintain return-towork programs for certain employees; providing program goals; requiring the Division of Risk Management to evaluate agency risk management programs; requiring reports; requiring agencies to respond to the division's evaluation and recommendations within a specified time; requiring the division to submit the evaluation report to the legislative appropriations committees in certain circumstances; amending s. 440.13, F.S.; revising requirements for determining the amount of a reimbursement for repackaged or relabeled prescription medication; providing limitations; amending s. 440.50, F.S.; providing for reversion of certain unencumbered and undisbursed funds to the Workers' Compensation Administration

Trust Fund; providing an effective date.

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

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- Section 1. Paragraph (h) of subsection (2) of section 20.121, Florida Statutes, is amended to read:
- 20.121 Department of Financial Services.—There is created a Department of Financial Services.
- (2) DIVISIONS.—The Department of Financial Services shall consist of the following divisions:
 - (h) The Division of Consumer Services.
- 1. The Division of Consumer Services shall perform the following functions concerning products or services regulated by the department of Financial Services or by either office of the Office of Insurance Regulation Financial Services Commission:
 - a. Receive inquiries and complaints from consumers.
- b. Prepare and disseminate such information as the department deems appropriate to inform or assist consumers.
- c. Provide direct assistance and advocacy for consumers who request such assistance or advocacy.
- d. With respect to apparent or potential violations of law or applicable rules by a person or entity licensed by the department or office by either office of the commission, report such apparent or potential violations violation to the office or the appropriate division of the department or office of the commission, which may take such further action as it deems appropriate.
- e. Designate an employee of the division as primary contact for consumers on issues relating to sinkholes.
 - 2. Any person licensed or issued a certificate of authority

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by the department or by the Office of Insurance Regulation shall respond, in writing, to the Division of Consumer Services within 20 days after receipt of a written request for information from the division concerning a consumer complaint. The response must address the issues and allegations raised in the this complaint. The division may, in its discretion, impose an administrative penalty for failure to comply with this subparagraph of in an amount up to \$2,500 per violation upon any entity licensed by the department or the office of Insurance Regulation and \$250 for the first violation, \$500 for the second violation, and up to \$1,000 per violation thereafter upon any individual licensed by the department or the office of Insurance Regulation.

- 3. The department may adopt rules to <u>administer</u> implement the provisions of this paragraph.
- 4. The powers, duties, and responsibilities expressed or granted in this paragraph <u>do</u> shall not limit the powers, duties, and responsibilities of the Department of Financial Services, the Financial Services Commission, the Office of Insurance Regulation, or the Office of Financial Regulation set forth elsewhere in the Florida Statutes.

Section 2. Subsection (5) of section 284.01, Florida Statutes, is amended to read:

- 284.01 State Risk Management Trust Fund; coverages to be provided.—
- (5) Premiums charged to agencies for coverage shall be adopted promulgated on a retrospective rating arrangement based upon actual losses accruing to the fund and loss prevention results, taking into account reasonable expectations, maintenance, and stability of the fund and cost of reinsurance.

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Section 3. Section 284.36, Florida Statutes, is amended to read:

284.36 Appropriation deposits; premium payment.—Premiums for coverage by the State Risk Management Trust Fund as calculated on all coverages shall be billed and charged to each state agency according to coverages obtained by the fund for their benefit, and such obligations shall be paid promptly by each agency from its operating budget upon presentation of a bill therefor. After the first year of operation, premiums to be charged to all departments of the state are to be computed on a retrospective rating arrangement based upon actual losses accruing to the fund and loss prevention results, taking into account reasonable expectations, the maintenance and stability of the fund, and the cost of insurance.

Section 4. Section 284.42, Florida Statutes, is amended to read:

284.42 Reports on state insurance program.-

- (1) The Department of Financial Services, with the Department of Management Services, shall <u>conduct</u> <u>make</u> an analysis of the state insurance program <u>each year and submit the results on or before January 1 in a report to the Governor, the President of the Senate, and the Speaker of the House of Representatives <u>annually</u>, which <u>must shall</u> include:</u>
- (a) Complete underwriting information as to the nature of the risks accepted for self-insurance and those risks that are transferred to the insurance market.
- (b) The funds allocated to the Florida Casualty Risk Management Trust Fund and premiums paid for insurance through the market.

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(c) The method of handling legal matters and the cost allocated.

- (d) The method and cost of handling inspection and engineering of risks.
 - (e) The cost of risk management service purchased.
- (f) The cost of managing the State Insurance Program by the Department of Financial Services and the Department of Management Services.
- (2) The <u>Department of Financial Services and the Department</u> of <u>Management Services</u> departments shall make available complete claims history including description of loss, claims paid and reserved, and the cost of all claims handled by the state.
- (3) Beginning January 1, 2012, the Division of Risk

 Management shall include in its annual report an analysis of agency return-to-work efforts, including, but not limited to, agency return-to-work program performance metrics and a status report on participating return-to-work programs. The report must specify benchmarks, including, but not limited to, the average lost-time claims per year, per agency; the total number of lost claims; and specific agency measurable outcomes indicating the change in performance from year to year.
- Section 5. Subsections (3) and (4) are added to section 284.50, Florida Statutes, to read:
- 284.50 Loss prevention program; safety coordinators; Interagency Advisory Council on Loss Prevention; employee recognition program.—
- (3) All agencies that are provided workers' compensation insurance coverage by the State Risk Management Trust Fund which employ more than 6,000 full-time employees shall establish and

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maintain return-to-work programs for employees who are receiving workers' compensation benefits. Such programs shall have the primary goal of enabling injured employees to remain at work or return to work to perform job duties within the physical or mental functional limitations and restrictions established by the employees' treating physicians. If such limitations or restrictions are not established in writing by an employee's treating physician, the employee shall be deemed to be able to fully perform the same job duties he or she performed before the injury.

(4) The Division of Risk Management shall evaluate each agency's risk management programs, including, but not limited to, return-to-work, safety, and loss prevention programs, at least once every 5 years. Reports, including any recommended corrective action resulting from such evaluations, shall be provided to the head of the agency being evaluated, the Chief Financial Officer, and the director of the Division of Risk Management. The agency head must provide to the Division of Risk Management a response to all report recommendations within 45 days and a plan to implement any corrective action to be taken as part of the response. If the agency disagrees with any final report recommendations, including any recommended corrective action, or if the agency fails to implement any recommended corrective action within a reasonable time, the division shall submit the evaluation report to the appropriate legislative appropriations committees.

Section 6. Paragraph (c) of subsection (12) of section 440.13, Florida Statutes, is amended to read:

440.13 Medical services and supplies; penalty for

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175 violations; limitations.—

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- (12) CREATION OF THREE-MEMBER PANEL; GUIDES OF MAXIMUM REIMBURSEMENT ALLOWANCES.—
- (c) As to reimbursement for a prescription medication, regardless of the location or provider from whom the claimant receives the prescription medication, the reimbursement amount for a prescription shall be the average wholesale price plus \$4.18 for the dispensing fee, unless except where the carrier has contracted for a lower amount. If the drug has been repackaged or relabeled, the reimbursement amount shall be calculated by multiplying the number of units dispensed times the per-unit average wholesale price set by the original manufacturer of the underlying drug, which may not be the manufacturer of the repackaged or relabeled drug, plus a \$4.18 dispensing fee, unless the carrier has contracted for a lower amount. The repackaged or relabeled drug price may not exceed the amount otherwise payable had the drug not been repackaged or relabeled. Fees for pharmaceuticals and pharmaceutical services shall be reimbursable at the applicable fee schedule amount. If Where the employer or carrier has contracted for such services and the employee elects to obtain them through a provider not a party to the contract, the carrier shall reimburse at the schedule, negotiated, or contract price, whichever is lower. No Such contract may not shall rely on a provider that is not reasonably accessible to the employee.

Section 7. Subsection (5) is added to section 440.50, Florida Statutes, to read:

- 440.50 Workers' Compensation Administration Trust Fund.-
- (5) Funds appropriated by operating appropriation or

20111068 20-01162-11 204 nonoperating transfer from the Workers' Compensation 205 Administration Trust Fund to the Department of Education, the 206 Agency for Health Care Administration, the Department of 207 Business and Professional Regulation, the Department of Management Services, the First District Court of Appeal, and the 208 209 Justice Administrative Commission which remain unencumbered as 210 of June 30 or undisbursed as of September 30 each year revert to 211 the Workers' Compensation Administration Trust Fund. 212 Section 8. This act shall take effect July 1, 2011.

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