

By the Committee on Appropriations; and Senators Benacquisto, Hays, Bradley, Simpson, Bullard, Soto, Gibson, Detert, Ring, Clemens, Negron, Evers, Margolis, Abruzzo, Stargel, Thompson, Flores, Sobel, Hukill, Altman, Smith, Diaz de la Portilla, Braynon, Garcia, and Montford
576-02872-13

2013422c1

1 A bill to be entitled

2 An act relating to cancer treatment; providing a short
3 title; creating ss. 627.42391 and 641.313, F.S.;
4 providing definitions; requiring that an individual or
5 group insurance policy or contract or a health
6 maintenance contract that provides coverage for cancer
7 treatment medications provide coverage for orally
8 administered cancer treatment medications on a basis
9 no less favorable than that required by the policy or
10 contract for intravenously administered or injected
11 cancer treatment medications; prohibiting insurers,
12 health maintenance organizations, and certain other
13 entities from engaging in specified actions to avoid
14 compliance with this act; amending s. 627.6515, F.S.;
15 adding a cross-reference to conform to changes made by
16 the act; providing a directive to the Division of Law
17 Revision and Information; providing an effective date.

18
19 Be It Enacted by the Legislature of the State of Florida:

20
21 Section 1. This act may be cited as the "Cancer Treatment
22 Fairness Act."

23 Section 2. Section 627.42391, Florida Statutes, is created
24 to read:

25 627.42391 Insurance policies; cancer treatment parity;
26 orally administered cancer treatment medications.—

27 (1) As used in this section, the term:

28 (a) "Cancer treatment medication" means medication
29 prescribed by a treating physician who determines that the

576-02872-13

2013422c1

30 medication is medically necessary to kill or slow the growth of
31 cancerous cells in a manner consistent with nationally accepted
32 standards of practice.

33 (b) "Cost sharing" includes copayments, coinsurance, dollar
34 limits, and deductibles imposed on the covered person.

35 (2) An individual or group insurance policy delivered,
36 issued for delivery, renewed, amended, or continued in this
37 state that provides medical, major medical, or similar
38 comprehensive coverage and includes coverage for cancer
39 treatment medications must also cover prescribed, orally
40 administered cancer treatment medications and may not apply
41 cost-sharing requirements for orally administered cancer
42 treatment medications that are less favorable to the covered
43 person than cost-sharing requirements for intravenous or
44 injected cancer treatment medications covered under the policy
45 or contract.

46 (3) An insurer providing a policy or contract described in
47 subsection (2) and any participating entity through which the
48 insurer offers health services may not:

49 (a) Vary the terms of the policy in effect on the effective
50 date of this act to avoid compliance with this section.

51 (b) Provide any incentive, including, but not limited to, a
52 monetary incentive, or impose treatment limitations to encourage
53 a covered person to accept less than the minimum protections
54 available under this section.

55 (c) Penalize a health care practitioner or reduce or limit
56 the compensation of a health care practitioner for recommending
57 or providing services or care to a covered person as required
58 under this section.

576-02872-13

2013422c1

59 (d) Provide any incentive, including, but not limited to, a
60 monetary incentive, to induce a health care practitioner to
61 provide care or services that do not comply with this section.

62 (e) Change the classification of any intravenous or
63 injected cancer treatment medication or increase the amount of
64 cost sharing applicable to any intravenous or injected cancer
65 treatment medication in effect on the effective date of this act
66 in order to achieve compliance with this section.

67 Section 3. Section 641.313, Florida Statutes, is created to
68 read:

69 641.313 Health maintenance contracts; cancer treatment
70 parity; orally administered cancer treatment medications.-

71 (1) As used in this section, the term:

72 (a) "Cancer treatment medication" means medication
73 prescribed by a treating physician who determines that the
74 medication is medically necessary to kill or slow the growth of
75 cancerous cells in a manner consistent with nationally accepted
76 standards of practice.

77 (b) "Cost sharing" includes copayments, coinsurance, dollar
78 limits, and deductibles imposed on the covered person.

79 (2) A health maintenance contract delivered, issued for
80 delivery, renewed, amended, or continued in this state that
81 provides medical, major medical, or similar comprehensive
82 coverage and includes coverage for cancer treatment medications
83 must also cover prescribed, orally administered cancer treatment
84 medications and may not apply cost-sharing requirements for
85 orally administered cancer treatment medications that are less
86 favorable to the covered person than cost-sharing requirements
87 for intravenous or injected cancer treatment medications covered

576-02872-13

2013422c1

88 under the contract.

89 (3) A health maintenance organization providing a contract
90 described in subsection (2) and any participating entity through
91 which the health maintenance organization offers health services
92 may not:

93 (a) Vary the terms of the policy in effect on the effective
94 date of this act to avoid compliance with this section.

95 (b) Provide any incentive, including, but not limited to, a
96 monetary incentive, or impose treatment limitations to encourage
97 a covered person to accept less than the minimum protections
98 available under this section.

99 (c) Penalize a health care practitioner or reduce or limit
100 the compensation of a health care practitioner for recommending
101 or providing services or care to a covered person as required
102 under this section.

103 (d) Provide any incentive, including, but not limited to, a
104 monetary incentive, to induce a health care practitioner to
105 provide care or services that do not comply with this section.

106 (e) Change the classification of any intravenous or
107 injected cancer treatment medication or increase the amount of
108 cost sharing applicable to any intravenous or injected cancer
109 treatment medication in effect on the effective date of this act
110 in order to achieve compliance with this section.

111 Section 4. Subsection (2) of section 627.6515, Florida
112 Statutes, is amended to read:

113 627.6515 Out-of-state groups.—

114 (2) Except as otherwise provided in this part, this part
115 does not apply to a group health insurance policy issued or
116 delivered outside this state under which a resident of this

576-02872-13

2013422c1

117 state is provided coverage if:

118 (a) The policy is issued to an employee group the
119 composition of which is substantially as described in s.
120 627.653; a labor union group or association group the
121 composition of which is substantially as described in s.
122 627.654; an additional group the composition of which is
123 substantially as described in s. 627.656; a group insured under
124 a blanket health policy when the composition of the group is
125 substantially in compliance with s. 627.659; a group insured
126 under a franchise health policy when the composition of the
127 group is substantially in compliance with s. 627.663; an
128 association group to cover persons associated in any other
129 common group, which common group is formed primarily for
130 purposes other than providing insurance; a group that is
131 established primarily for the purpose of providing group
132 insurance, provided the benefits are reasonable in relation to
133 the premiums charged thereunder and the issuance of the group
134 policy has resulted, or will result, in economies of
135 administration; or a group of insurance agents of an insurer,
136 which insurer is the policyholder;

137 (b) Certificates evidencing coverage under the policy are
138 issued to residents of this state and contain in contrasting
139 color and not less than 10-point type the following statement:
140 "The benefits of the policy providing your coverage are governed
141 primarily by the law of a state other than Florida"; and

142 (c) The policy provides the benefits specified in ss.
143 627.419, 627.42391, 627.6574, 627.6575, 627.6579, 627.6612,
144 627.66121, 627.66122, 627.6613, 627.667, 627.6675, 627.6691, and
145 627.66911, and complies with the requirements of s. 627.66996.

576-02872-13

2013422c1

146 (d) Applications for certificates of coverage offered to
147 residents of this state must contain, in contrasting color and
148 not less than 12-point type, the following statement on the same
149 page as the applicant's signature:

151 "This policy is primarily governed by the laws of
152 ...insert state where the master policy is filed....
153 As a result, all of the rating laws applicable to
154 policies filed in this state do not apply to this
155 coverage, which may result in increases in your
156 premium at renewal that would not be permissible under
157 a Florida-approved policy. Any purchase of individual
158 health insurance should be considered carefully, as
159 future medical conditions may make it impossible to
160 qualify for another individual health policy. For
161 information concerning individual health coverage
162 under a Florida-approved policy, consult your agent or
163 the Florida Department of Financial Services."

164
165 This paragraph applies only to group certificates providing
166 health insurance coverage which require individualized
167 underwriting to determine coverage eligibility for an individual
168 or premium rates to be charged to an individual except for the
169 following:

- 170 1. Policies issued to provide coverage to groups of persons
171 all of whom are in the same or functionally related licensed
172 professions, and providing coverage only to such licensed
173 professionals, their employees, or their dependents;
- 174 2. Policies providing coverage to small employers as

576-02872-13

2013422c1

175 defined by s. 627.6699. Such policies shall be subject to, and
176 governed by, the provisions of s. 627.6699;

177 3. Policies issued to a bona fide association, as defined
178 by s. 627.6571(5), provided that there is a person or board
179 acting as a fiduciary for the benefit of the members, and such
180 association is not owned, controlled by, or otherwise associated
181 with the insurance company; or

182 4. Any accidental death, accidental death and
183 dismemberment, accident-only, vision-only, dental-only, hospital
184 indemnity-only, hospital accident-only, cancer, specified
185 disease, Medicare supplement, products that supplement Medicare,
186 long-term care, or disability income insurance, or similar
187 supplemental plans provided under a separate policy,
188 certificate, or contract of insurance, which cannot duplicate
189 coverage under an underlying health plan, coinsurance, or
190 deductibles or coverage issued as a supplement to workers'
191 compensation or similar insurance, or automobile medical-payment
192 insurance.

193 Section 5. The Division of Law Revision and Information is
194 directed to replace the phrase "the effective date of this act"
195 wherever it occurs in this act with the date this act takes
196 effect.

197 Section 6. This act shall take effect July 1, 2013.