

By Senator Gutman

34-1335-98

1 A bill to be entitled
2 An act relating to insurance; amending s.
3 627.736, F.S.; authorizing insurers to contract
4 with preferred providers to provide personal
5 injury protection benefits; providing for a
6 reduced premium rate; providing coverage;
7 providing an election form; providing a
8 presumption; authorizing the Department of
9 Insurance to adopt rules; providing
10 definitions; specifying procedures; providing
11 an effective date.

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

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15 Section 1. Subsection (10) of section 627.736, Florida
16 Statutes, 1996 Supplement, is amended to read:

17 627.736 Required personal injury protection benefits;
18 exclusions; priority.--

19 (10)(a) An insurer may negotiate and enter into
20 contracts with licensed health care providers directly or
21 indirectly through contracts with entities eligible under s.
22 440.134(1)(g) for the benefits described in this section,
23 referred to in this section as "preferred providers," which
24 shall include health care providers licensed under chapters
25 458, 459, 460, 461, ~~and 463,~~ and 466. The insurer may provide
26 an option to an insured to use a preferred provider at the
27 time of purchase of the policy for personal injury protection
28 benefits, referred to as a "preferred provider policy," if the
29 requirements of this subsection are met. The preferred
30 provider policy must be offered at a reduced premium rate. ~~If~~
31 ~~the insured elects to use a provider who is not a preferred~~

1 ~~provider, whether the insured purchased a preferred provider~~
2 ~~policy or a nonpreferred provider policy, the medical benefits~~
3 ~~provided by the insurer shall be as required by this section.~~
4 If the insured elects to use a provider who is a preferred
5 provider, the insurer may pay or provide medical benefits in
6 excess of the benefits required by this section and may waive
7 or lower the amount of any deductible or coinsurance that
8 applies to such medical benefits. The preferred provider
9 policy may provide that, other than for emergency service and
10 care as defined in s. 395.002, if the insured elects to use a
11 provider who is not a preferred provider, the insurer may
12 apply a deductible and co-insurance that are greater than
13 those provided by ss. 627.736(1)(a) and 627.739. If the
14 insurer offers a preferred provider policy to a policyholder
15 or applicant, it must also offer a nonpreferred provider
16 policy. If a named insured selects a preferred provider
17 policy, such election is binding on any person who is entitled
18 to coverage under the named insured's policy. If an election
19 form is signed by any named insured, it is conclusively
20 presumed as to both the insurer and the agent that there was
21 an informed, knowing selection of coverage under this
22 subsection on behalf of all insureds. Such selection shall
23 apply to any policy that renews, extends, changes, supersedes,
24 or replaces an existing policy unless the named insured
25 requests deletion of the preferred provider option in writing
26 and pays the appropriate premium for the nonpreferred provider
27 policy. The insurer shall provide each policyholder with a
28 current roster of preferred providers in the county in which
29 the insured resides at the time of purchase of such policy,
30 and shall make such list available for public inspection
31 during regular business hours at the principal office of the

1 insurer within the state. The department may adopt rules to
2 administer this subsection, including rules prescribing
3 deductibles and co-insurance under the preferred provider
4 policy and the form and manner for the selection of the
5 preferred provider policy.

6 (b) After the insurer has received authorization from
7 the Agency for Health Care Administration pursuant to the
8 procedures and criteria in s. 440.134(2)(a) and (3)-(15), the
9 insurer may contract directly or indirectly with any entity
10 that is eligible under s. 440.134(1)(g) to provide or manage
11 appropriate remedial treatment, care, and attendance to
12 insureds under this subsection. The authorization may be
13 suspended as provided in s. 440.134(18)-(22). For purposes of
14 this subsection, references in s. 440.134(1)(1) to the terms
15 "injured worker" and "employee" mean an insured, and the term
16 "workers' compensation managed care arrangement" means a
17 preferred provider policy arrangement.

18 Section 2. This act shall take effect July 1, 1998.

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21 SENATE SUMMARY

22 Authorizes insurers to contract with preferred providers
23 to provide personal injury protection benefits. Provides
24 for a reduced premium rate. Provides coverage. Provides
25 an election form. Provides a presumption. Authorizes the
26 Department of Insurance to adopt rules. Provides
27 definitions. Specifies procedures.
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