

1
2 An act relating to health insurance; amending
3 s. 636.016, F.S.; requiring prepaid limited
4 health service contracts to provide certain
5 information; requiring prepaid limited health
6 service organizations to provide certain
7 information; amending s. 636.038, F.S.;
8 requiring prepaid limited health service
9 organizations to report certain information
10 annually; providing an effective date.

11
12 Be It Enacted by the Legislature of the State of Florida:

13
14 Section 1. Subsection (3) of section 636.016, Florida
15 Statutes, is amended, and subsection (13) is added to said
16 section, to read:

17 636.016 Prepaid limited health service contracts.--For
18 any entity licensed prior to October 1, 1993, all subscriber
19 contracts in force at such time shall be in compliance with
20 this section upon renewal of such contract.

21 (3) The documents provided pursuant to subsection (2)
22 must have a clear and understandable description of the method
23 used by the prepaid limited health service organization for
24 resolving subscriber grievances and, for such documents
25 printed after October 1, 1998, must contain the address of the
26 department and the department's toll-free consumer hotline.

27 (13) Each prepaid limited health service organization
28 shall make available to all subscribers, upon request, a
29 description of the authorization and referral process for
30 services or a description of the process used to analyze the
31

1 qualifications and credentials of providers under contract
2 with the organization.

3 Section 2. Section 636.038, Florida Statutes, is
4 amended to read:

5 636.038 Complaint system.--

6 (1) Every prepaid limited health service organization
7 must establish and maintain a complaint system providing
8 reasonable procedures for resolving written complaints
9 initiated by enrollees and providers. This section does not
10 preclude an enrollee or a provider from filing a complaint
11 with the department or limit the department's ability to
12 investigate such complaints.

13 (2) Every prepaid limited health service organization
14 shall report annually to the department the total number of
15 grievances handled, a categorization of the cases underlying
16 the grievances, and the final disposition of the grievances.

17 Section 3. This act shall take effect October 1, 1998.
18
19
20
21
22
23
24
25
26
27
28
29
30
31