Florida House of Representatives - 1998

CS/HB 3105

By the Committee on Health Care Services and Representatives Ritter, Casey, Tamargo, Peaden, Culp, Livingston, Frankel, Hafner, Heyman, Bloom, Fasano, Fuller, Littlefield, Lippman, Kelly, Ritchie, Fischer, Mackenzie, Effman, Sanderson, Starks, Maygarden, Jones, Wise and Crow 1 A bill to be entitled An act relating to health insurance; creating 2 3 ss. 627.64193 and 627.66911, F.S., and amending 4 s. 641.31, F.S.; providing requirements for 5 coverage for cleft lip and cleft palate; amending ss. 627.6515 and 627.6699, F.S.; 6 7 providing for application of such requirements; 8 providing a finding of public necessity; 9 providing an effective date. 10 11 Be It Enacted by the Legislature of the State of Florida: 12 13 Section 1. Section 627.64193, Florida Statutes, is 14 created to read: 627.64193 Coverage for cleft lip and cleft palate.--A 15 16 health insurance policy that provides coverage for a child 17 under the age of 18 must provide coverage for cleft lip and cleft palate for such child. The coverage must include 18 medical, dental, speech, mental health, and genetic counseling 19 20 services performed by a licensed physician, dentist, speech pathologist, audiologist, dietician, or psychologist for 21 services within the scope of such practitioner's license only 22 if such services are prescribed by the treating physician or 23 surgeon and such physician or surgeon certifies that such 24 services are medically necessary and consequent to treatment 25 26 of the cleft lip or cleft palate. Section 2. Paragraph (c) of subsection (2) of section 27 627.6515, Florida Statutes, is amended to read: 28 29 627.6515 Out-of-state groups.--30 31

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(2) This part does not apply to a group health 1 2 insurance policy issued or delivered outside this state under 3 which a resident of this state is provided coverage if: 4 (c) The policy provides the benefits specified in ss. 5 627.419, 627.6574, 627.6575, 627.6579, 627.6612, 627.66121, б 627.66122, 627.6613, 627.667, 627.6675, and 627.6691, and 7 627.66911. 8 Section 3. Section 627.66911, Florida Statutes, is 9 created to read: 10 627.66911 Coverage for cleft lip and cleft palate.--A health insurance policy that provides coverage for a child 11 12 under the age of 18 must provide coverage for cleft lip and 13 cleft palate for such child. The coverage must include 14 medical, dental, speech, mental health, and genetic counseling 15 services performed by a licensed physician, dentist, speech 16 pathologist, audiologist, dietician, or psychologist for 17 services within the scope of such practitioner's license only if such services are prescribed by the treating physician or 18 19 surgeon and such physician or surgeon certifies that such 20 services are medically necessary and consequent to treatment of the cleft lip or cleft palate. 21 Section 4. Paragraph (b) of subsection (12) of section 22 627.6699, Florida Statutes, is amended to read: 23 24 627.6699 Employee Health Care Access Act.--(12) STANDARD, BASIC, AND LIMITED HEALTH BENEFIT 25 26 PLANS. --27 (b)1. Each small employer carrier issuing new health 28 benefit plans shall offer to any small employer, upon request, 29 a standard health benefit plan and a basic health benefit plan that meets the criteria set forth in this section. 30 31

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1 For purposes of this subsection, the terms 2. 2 "standard health benefit plan" and "basic health benefit plan" 3 mean policies or contracts that a small employer carrier offers to eligible small employers that contain: 4 5 a. An exclusion for services that are not medically б necessary or that are not covered preventive health services; 7 and 8 b. A procedure for preauthorization by the small 9 employer carrier, or its designees. 10 A small employer carrier may include the following 3. managed care provisions in the policy or contract to control 11 12 costs: 13 a. A preferred provider arrangement or exclusive 14 provider organization or any combination thereof, in which a small employer carrier enters into a written agreement with 15 16 the provider to provide services at specified levels of reimbursement or to provide reimbursement to specified 17 providers. Any such written agreement between a provider and a 18 19 small employer carrier must contain a provision under which the parties agree that the insured individual or covered 20 21 member has no obligation to make payment for any medical 22 service rendered by the provider which is determined not to be medically necessary. A carrier may use preferred provider 23 arrangements or exclusive provider arrangements to the same 24 25 extent as allowed in group products that are not issued to 26 small employers. 27 b. A procedure for utilization review by the small 28 employer carrier or its designees. 29 30 This subparagraph does not prohibit a small employer carrier 31 from including in its policy or contract additional managed 3 CODING: Words stricken are deletions; words underlined are additions.

1 care and cost containment provisions, subject to the approval 2 of the department, which have potential for controlling costs 3 in a manner that does not result in inequitable treatment of insureds or subscribers. The carrier may use such provisions 4 5 to the same extent as authorized for group products that are б not issued to small employers. 7 4. The standard health benefit plan shall include: 8 a. Coverage for inpatient hospitalization; 9 b. Coverage for outpatient services; 10 Coverage for newborn children pursuant to s. c. 11 627.6575; d. 12 Coverage for child care supervision services 13 pursuant to s. 627.6579; 14 Coverage for adopted children upon placement in the e. residence pursuant to s. 627.6578; 15 16 f. Coverage for mammograms pursuant to s. 627.6613; 17 g. Coverage for handicapped children pursuant to s. 18 627.6615; 19 h. Emergency or urgent care out of the geographic 20 service area; and 21 i. Coverage for services provided by a hospice 22 licensed under s. 400.602 in cases where such coverage would be the most appropriate and the most cost-effective method for 23 treating a covered illness. 24 25 The standard health benefit plan and the basic 5. 26 health benefit plan may include a schedule of benefit 27 limitations for specified services and procedures. If the 28 committee develops such a schedule of benefits limitation for 29 the standard health benefit plan or the basic health benefit 30 plan, a small employer carrier offering the plan must offer 31

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the employer an option for increasing the benefit schedule 1 2 amounts by 4 percent annually. 3 6. The basic health benefit plan shall include all of 4 the benefits specified in subparagraph 4.; however, the basic 5 health benefit plan shall place additional restrictions on the б benefits and utilization and may also impose additional cost 7 containment measures. 8 7. Sections 627.419(2), (3), and (4), 627.6574, 627.6612, 627.66121, 627.66122, 627.6616, 627.6618, and 9 10 627.668, and 627.66911 apply to the standard health benefit 11 plan and to the basic health benefit plan. However, notwithstanding said provisions, the plans may specify limits 12 13 on the number of authorized treatments, if such limits are 14 reasonable and do not discriminate against any type of provider. 15 16 8. Each small employer carrier that provides for inpatient and outpatient services by allopathic hospitals may 17 provide as an option of the insured similar inpatient and 18 outpatient services by hospitals accredited by the American 19 20 Osteopathic Association when such services are available and 21 the osteopathic hospital agrees to provide the service. 22 Section 5. Subsection (34) is added to section 641.31, Florida Statutes, to read: 23 24 641.31 Health maintenance contracts.--25 (34) A health maintenance contract that provides 26 coverage for a child under the age of 18 must provide coverage 27 for cleft lip and cleft palate for such child. The coverage 28 must include medical, dental, speech, mental health, and 29 genetic counseling services performed by a licensed physician, dentist, speech pathologist, audiologist, dietician, or 30 psychologist for services within the scope of such 31 5

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practitioner's license only if such services are prescribed by the treating physician or surgeon and such physician or surgeon certifies that such services are medically necessary and consequent to treatment of the cleft lip or cleft palate. Section 6. Pursuant to section 18, Article VII of the State Constitution, the Legislature determines that this act fulfills an important state interest. Section 7. This act shall take effect October 1 of the year in which enacted and shall apply to policies and contracts issued or renewed on or after such date. 

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