

By Representative Wasserman Schultz

1 A bill to be entitled
2 An act relating to breast cancer treatment;
3 creating ss. 627.64185 and 627.66125, F.S.;
4 prohibiting certain health insurance policies
5 from imposing certain limitations on coverage
6 for hospital stays for breast cancer treatments
7 under certain circumstances; requiring such
8 policies to provide for postsurgical care;
9 requiring insurers to communicate certain
10 information to a treating physician or
11 hospital; amending s. 641.31, F.S.; prohibiting
12 certain health maintenance contracts from
13 imposing certain limitations on coverage for
14 hospital stays for breast cancer treatments
15 under certain circumstances; requiring such
16 contracts to provide for postsurgical care;
17 requiring insurers to communicate certain
18 information to a treating physician or
19 hospital; providing an effective date.

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

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23 Section 1. Section 627.64185, Florida Statutes, is
24 created to read:

25 627.64185 Coverage for breast cancer treatments.--

26 (1) Any insurer which issues a health insurance policy
27 which provides coverage for breast cancer treatments,
28 including, but not limited to, mastectomies or lymph node
29 dissections, may not limit coverage for the length of stay in
30 a hospital to any time period that is less than that
31 determined by the treating gynecological or oncological care

1 provider to be medically necessary, in accordance with
2 prevailing medical standards and consistent with the
3 guidelines for gynecological and oncological care of the
4 American College of Obstetricians and Gynecologists, the
5 Society of Gynecologic Oncologists, and the American College
6 of Surgeons.

7 (2) Nothing in this section affects any agreement
8 between an insurer and a hospital or other health care
9 provider with respect to reimbursement for health care
10 services provided or prohibits appropriate utilization review
11 by an insurer.

12 (3) Any health insurance policy that provides
13 coverage, benefits, or services for breast cancer treatment
14 must also provide coverage for postsurgical followup care for
15 the patient. Such care must include, but not be limited to,
16 assessment of the surgical wound to evaluate healing and any
17 possibility of infection, the patient's pain level and need
18 for alterations in prescribed therapies, any tissue swelling,
19 including range of motion and lymph node findings, and any
20 changes in the patient's vital signs. Such care shall also
21 include an assessment of the patient's return to baseline
22 ability of independent functioning, including both physical
23 and ambulatory recovery, as well as preexisting psychosocial
24 stability. The assessments may be provided at the hospital,
25 at the attending physician's office, or in the patient's home
26 by a qualified licensed health care professional trained in
27 postsurgical mastectomy care.

28 (4) An insurer subject to subsection (1) shall
29 communicate active case questions and concerns regarding
30 postdelivery care directly to the treating physician or
31 hospital in written form, in addition to other forms of

1 communication. Such insurers shall also use a process which
2 includes a written protocol for utilization review and quality
3 assurance.

4 Section 2. Section 627.66125, Florida Statutes, is
5 created to read:

6 627.66125 Coverage for breast cancer treatments.--

7 (1) Any insurer which issues a group, blanket, or
8 franchise policy of health insurance which provides coverage
9 for breast cancer treatments, including, but not limited to,
10 mastectomies or lymph node dissections, may not limit coverage
11 for the length of stay in a hospital to any time period that
12 is less than that determined by the treating gynecological or
13 oncological care provider to be medically necessary, in
14 accordance with prevailing medical standards and consistent
15 with the guidelines for gynecological and oncological care of
16 the American College of Obstetricians and Gynecologists, the
17 Society of Gynecologic Oncologists, and the American College
18 of Surgeons.

19 (2) Nothing in this section affects any agreement
20 between an insurer and a hospital or other health care
21 provider with respect to reimbursement for health care
22 services provided or prohibits appropriate utilization review
23 by an insurer.

24 (3) Any group, blanket, or franchise policy of health
25 insurance that provides coverage, benefits, or services for
26 breast cancer treatment must also provide coverage for
27 postsurgical followup care for the patient. Such care must
28 include, but not be limited to, assessment of the surgical
29 wound to evaluate healing and any possibility of infection,
30 the patient's pain level and need for alterations in
31 prescribed therapies, any tissue swelling, including range of

1 motion and lymph node findings, and any changes in the
2 patient's vital signs. Such care shall also include an
3 assessment of the patient's return to baseline ability of
4 independent functioning, including both physical and
5 ambulatory recovery, as well as preexisting psychosocial
6 stability. The assessments may be provided at the hospital,
7 at the attending physician's office, or in the patient's home
8 by a qualified licensed health care professional trained in
9 postsurgical mastectomy care.

10 (4) An insurer subject to subsection (1) shall
11 communicate active case questions and concerns regarding
12 postdelivery care directly to the treating physician or
13 hospital in written form, in addition to other forms of
14 communication. Such insurers shall also use a process which
15 includes a written protocol for utilization review and quality
16 assurance.

17 Section 3. Subsection (29) is added to section 641.31,
18 Florida Statutes, 1996 Supplement, to read:

19 641.31 Health maintenance contracts.--

20 (29)(a) Any health maintenance contract which provides
21 coverage, benefits, or services for breast cancer treatment,
22 including, but not limited to, mastectomies or lymph node
23 dissections, may not limit coverage for the length of stay in
24 a hospital to any time period that is less than that
25 determined by the treating gynecological or oncological care
26 provider to be medically necessary, in accordance with
27 prevailing medical standards and consistent with the
28 guidelines for gynecological and oncological care of the
29 American College of Obstetricians and Gynecologists, the
30 Society of Gynecologic Oncologists, and the American College
31 of Surgeons.

1 (b) Nothing in this subsection affects any agreement
2 between a health maintenance organization and a hospital or
3 other health care provider with respect to reimbursement for
4 health care services provided or prohibits appropriate
5 utilization review by a health maintenance organization.

6 (c) Any health maintenance contract that provides
7 coverage, benefits, or services for breast cancer treatment
8 must also provide coverage for postsurgical followup care for
9 the patient. Such care must include, but not be limited to,
10 assessment of the surgical wound to evaluate healing and any
11 possibility of infection, the patient's pain level and need
12 for alterations in prescribed therapies, any tissue swelling,
13 including range of motion and lymph node findings, and any
14 changes in the patient's vital signs. Such care shall also
15 include an assessment of the patient's return to baseline
16 ability of independent functioning, including both physical
17 and ambulatory recovery, as well as preexisting psychosocial
18 stability. The assessments may be provided at the hospital,
19 at the attending physician's office, or in the patient's home
20 by a qualified licensed health care professional trained in
21 postsurgical mastectomy care.

22 (d) A health maintenance organization subject to
23 paragraph (a) shall communicate active case questions and
24 concerns regarding postdelivery care directly to the treating
25 physician or hospital in written form, in addition to other
26 forms of communication. Such organization shall also use a
27 process which includes a written protocol for utilization
28 review and quality assurance.

29 Section 4. This act shall take effect October 1, 1997.
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HOUSE SUMMARY

Prohibits health insurance policies and health maintenance contracts which provide coverage for breast cancer treatments, such as mastectomies, lymph node dissections, or others, from limiting coverage for lengths of hospital stays to times less than that determined to be medically necessary by the treating gynecological or oncological care provider. Requires such policies and contracts to provide for postsurgical care for mastectomy patients. Requires insurers and health maintenance organizations to communicate active case questions and concerns regarding any proposed surgical procedures or postsurgical care to the treating physician or the hospital. See bill for details.