

1 A bill to be entitled
2 An act relating to insurance contracts;
3 amending s. 626.022, F.S.; providing an
4 exception from certain insurance licensing
5 requirements for certified public accountants
6 acting within the scope of their profession;
7 amending s. 626.883, F.S.; requiring that
8 certain information be included with the
9 payments made by a fiscal intermediary to a
10 health care provider; amending s. 641.31, F.S.,
11 relating to health maintenance contracts;
12 requiring a health maintenance organization to
13 provide notice prior to increasing the
14 copayments or limiting any benefits under a
15 group contract; requiring certain health
16 maintenance contracts to cover persons licensed
17 to practice massage under certain
18 circumstances; amending s. 641.315, F.S.;
19 providing that a contract between a health
20 maintenance organization and a health care
21 provider may not restrict the provider from
22 entering into a contract with any other health
23 maintenance organizations and may not restrict
24 the health maintenance organization from
25 entering into a contract with any other
26 provider; amending s. 641.316, F.S.; requiring
27 that certain information be included with the
28 payments made by a fiscal intermediary to a
29 health care provider; providing for
30 applicability; amending s. 641.315, F.S.;
31 prohibiting a health maintenance organization's

1 contract from preventing a subscriber from
2 receiving certain services; amending s. 641.31,
3 F.S.; prohibiting a health maintenance
4 organization's contract from preventing a
5 subscriber from receiving certain services;
6 amending s. 641.3155, F.S.; prohibiting a
7 health maintenance organization from denying
8 payment to certain physicians for inpatient
9 hospital services; providing an effective date.

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

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13 Section 1. Paragraph (d) is added to subsection (1) of
14 section 626.022, Florida Statutes, 1998 Supplement, to read:

15 626.022 Scope of part.--

16 (1) This part applies as to insurance agents,
17 solicitors, service representatives, adjusters, and insurance
18 agencies; as to any and all kinds of insurance; and as to
19 stock insurers, mutual insurers, reciprocal insurers, and all
20 other types of insurers, except that:

21 (d) This part does not apply to a certified public
22 accountant licensed under chapter 473 who is acting within the
23 scope of the practice of public accounting, as defined in s.
24 473.302, provided that the activities of the certified public
25 accountant are limited to advising a client of the necessity
26 of obtaining insurance, the amount of insurance needed, or the
27 line of coverage needed, and provided that the certified
28 public accountant does not directly or indirectly receive or
29 share in any commission, referral fee, or solicitor's fee.

30 Section 2. Subsection (6) is added to section 626.883,
31 Florida Statutes, to read:

1 626.883 Administrator as intermediary; collections
2 held in fiduciary capacity; establishment of account;
3 disbursement; payments on behalf of insurer.--

4 (6) All payments to a health care provider by a fiscal
5 intermediary for noncapitated providers must include an
6 explanation of services being reimbursed which includes, at a
7 minimum, the patient's name, the date of service, the
8 procedure code, the amount of reimbursement, and the
9 identification of the plan on whose behalf the payment is
10 being made. For capitated providers, the statement of services
11 must include the number of patients covered by the contract,
12 the rate per patient, the total amount of the payment, and the
13 identification of the plan on whose behalf the payment is
14 being made.

15 Section 3. Subsections (36) and (37) are added to
16 section 641.31, Florida Statutes, 1998 Supplement, to read:

17 641.31 Health maintenance contracts.--

18 (36) A health maintenance organization may increase
19 the copayment for any benefit, or delete, amend, or limit any
20 of the benefits to which a subscriber is entitled under the
21 group contract, upon written notice to the contract holder at
22 least 45 days in advance of the time of coverage renewal. The
23 health maintenance organization may amend the contract with
24 the contract holder, with such amendment to be effective
25 immediately at the time of coverage renewal. The written
26 notice to the contract holder shall specifically identify any
27 deletions, amendments, or limitations to any of the benefits
28 provided in the group contract during the current contract
29 period which will be included in the group contract upon
30 renewal. This subsection does not apply to any increases in
31 benefits. The 45-day notice requirement shall not apply if

1 benefits are amended, deleted, or limited at the request of
2 the contract holder.

3 (37) All health maintenance contracts that provide
4 coverage for massage must also cover the services of persons
5 licensed to practice massage pursuant to chapter 480 if the
6 massage is prescribed by a contracted physician licensed under
7 chapter 458, chapter 459, chapter 460, or chapter 461 as
8 medically necessary and the prescription specifies the number
9 of treatments. Such massage services are subject to the same
10 terms, conditions, and limitations as those of other covered
11 services.

12 Section 4. Subsection (9) is added to section 641.315,
13 Florida Statutes, to read:

14 641.315 Provider contracts.--

15 (9) A contract between a health maintenance
16 organization and a provider of health care services may not
17 contain any provision that in any way prohibits or restricts:

18 (a) The health care provider from entering into a
19 contract with any other health maintenance organization; or

20 (b) The health maintenance organization from entering
21 into a contract with any other health care provider.

22 Section 5. Paragraph (a) of subsection (2) of section
23 641.316, Florida Statutes, 1998 Supplement, is amended to
24 read:

25 641.316 Fiscal intermediary services.--

26 (2)(a) The term "fiduciary" or "fiscal intermediary
27 services" means reimbursements received or collected on behalf
28 of health care professionals for services rendered, patient
29 and provider accounting, financial reporting and auditing,
30 receipts and collections management, compensation and
31 reimbursement disbursement services, or other related

1 fiduciary services pursuant to health care professional
2 contracts with health maintenance organizations. All payments
3 to a health care provider by a fiscal intermediary for
4 noncapitated providers must include an explanation of services
5 being reimbursed which includes, at a minimum, the patient's
6 name, the date of service, the procedure code, the amount of
7 reimbursement, and the identification of the plan on whose
8 behalf the payment is being made. For capitated providers, the
9 statement of services must include the number of patients
10 covered by the contract, the rate per patient, the total
11 amount of the payment, and the identification of the plan on
12 whose behalf the payment is being made.

13 (b) The term "fiscal intermediary services
14 organization" means a person or entity which performs
15 fiduciary or fiscal intermediary services to health care
16 professionals who contract with health maintenance
17 organizations other than a fiscal intermediary services
18 organization owned, operated, or controlled by a hospital
19 licensed under chapter 395, an insurer licensed under chapter
20 624, a third-party administrator licensed under chapter 626, a
21 prepaid limited health service organization licensed under
22 chapter 636, a health maintenance organization licensed under
23 this chapter, or physician group practices as defined in s.
24 455.654(3)(f).

25 Section 6. Subsection (9) is added to section 641.315,
26 Florida Statutes, to read:

27 641.315 Provider contracts.--

28 (9) No health maintenance organization's contract
29 shall prevent a subscriber from continuing to receive services
30 from the subscriber's contracted primary care physician or
31 contracted admitting physician during an inpatient stay.

1 Section 7. Subsection (38) is added to section 641.31,
2 Florida Statutes, 1998 Supplement, to read:

3 641.31 Health maintenance contracts.--

4 (38) No health maintenance organization's contract
5 shall prevent a subscriber from continuing to receive services
6 from the subscriber's contracted primary care physician or
7 contracted admitting physician during an inpatient stay.

8 Section 8. Subsection (4) is added to section
9 641.3155, Florida Statutes, 1998 Supplement, to read:

10 641.3155 Provider contracts; payment of claims.--

11 (4) A health maintenance organization shall not deny
12 payment to a contract primary care physician or contract
13 admitting physician for inpatient hospital services provided
14 by the contracted physician to the subscriber.

15 Section 9. This act shall take effect July 1, 1999,
16 and shall apply to all contracts renewed or entered into on or
17 after that date.

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