By Representatives Goode, Melvin, Peaden, Hart, Barreiro, Brown, Farkas, Fiorentino, Valdes, Casey, Greenstein, Villalobos, Sanderson and Ritchie

A bill to be entitled
An act relating to health care; providing
procedures required for the termination or
nonrenewal of a health care provider contract
by a managed care plan; requiring certain
written notice; providing for hearing by a
panel appointed by the managed care plan;
providing for recommendations to and decisions
of the managed care plan; specifying
timeframes; providing an effective date.

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

Section 1. Termination or nonrenewal of a health care provider contract; notice; hearing.—A managed care plan may not terminate or fail to renew a contract with a health care provider unless the managed care plan provides the health care provider with a written explanation of the reasons for the proposed contract termination or nonrenewal and an opportunity for a review or hearing as provided in this section, except in cases involving imminent harm to patient health or a final disciplinary action by the provider's licensing board or other governmental agency which impairs the health care provider's ability to practice within the jurisdiction.

- (1) The notice of the proposed contract termination or nonrenewal provided by the managed care plan to the health care provider must include:
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- (a) The reasons for the proposed action.
- (b) Notice that the health care provider has the right to request a hearing or review, at the provider's discretion,
- 31 before a panel appointed by the managed care plan.

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- (c) A time limit of not less than 30 days within which a health care provider may request a hearing.
- (d) A time limit for a hearing, which hearing must be held not less than 30 days nor more than 60 days after the date of receipt of the request for a hearing.
- (2) If the health care provider requests a hearing, the health care provider must be provided a written notice that states:
 - (a) The place, time, and date of the hearing.
- (b) The names of the witnesses, if any, expected to testify at the hearing on behalf of the managed care plan.
- of three persons appointed by the managed care plan. At least one person on the panel must be a clinical peer in the same discipline and the same or similar specialty as the health care provider under review. The hearing panel may consist of more than three persons, if the number of clinical peers on the panel constitutes one-third or more of the total membership of the panel.
- (4) The hearing panel must render a decision on the proposed action in a timely manner, which decision must include the panel's recommendation as to whether the provider contract should be reinstated or renewed by the managed care plan, provisionally reinstated or renewed subject to conditions set forth by the managed care plan, terminated by the managed care plan, or not renewed by the managed care plan. The panel's decision or recommendation must be provided in writing to the governing body of the managed care plan.
- (5) The governing body of the managed care plan, after considering the decision and recommendation of the panel, must render its decision within 30 days after the issuance of the

panel's recommendation. The governing body's decision must 1 include reinstatement or renewal of the health care provider 2 3 contract by the managed care plan, provisional reinstatement 4 or renewal subject to conditions set forth by the managed care 5 plan, termination of the health care provider contract, or 6 nonrenewal of the health care provider contract. 7 (6) A decision by the governing body of the managed 8 care plan to terminate or nonrenew a contract with a health 9 care provider may not be effective earlier than 30 days after 10 the receipt by the health care provider of the governing 11 body's decision or earlier than 90 days after the health care 12 provider's receipt of the notice of termination or nonrenewal. 13 Section 2. This act shall take effect October 1, 1999. 14 ********* 15 16 HOUSE SUMMARY 17 Requires managed care plans to provide a written explanation of the reasons for the proposed termination or nonrenewal of a provider contract. Specifies contents of such notice. Provides for the provider's right to review by a panel appointed by the managed care plan, and specifies requirements for composition of the panel. Provides for panel recommendations to and decisions by the governing body of the managed care plan. Specifies time limitations for requests for hearing, hearings, decisions by a managed care plan, and termination or nonrenewal of a provider contract. 18 19 20 21 22 23 24 25 26 27 2.8 29 30

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