

By Representative Kelly

1 A bill to be entitled
 2 An act relating to identification cards for
 3 pharmacy benefits; providing definitions;
 4 requiring administrators of certain insurance
 5 plans to issue identification cards to covered
 6 individuals; specifying required information;
 7 prohibiting pharmacy benefit managers from
 8 selling lists of patients which contain certain
 9 information; providing exceptions; providing
 10 application; requiring certain health benefit
 11 plans to issue identification cards to plan
 12 enrollees; specifying required information;
 13 providing exceptions; requiring the Department
 14 of Insurance to adopt rules; providing an
 15 effective date.

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

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 19 Section 1. (1)(a) For purposes of this subsection:

20 1. "Administrator" has the same meaning as that
 21 provided in s. 626.88, Florida Statutes, but also applies to
 22 pharmacy benefits.

23 2. "Pharmacy benefit manager" means a person, other
 24 than a pharmacy or pharmacist, who acts as an administrator in
 25 connection with pharmacy benefits.

26 3. "Plan" means a plan, fund, or program established,
 27 adopted, or maintained by a plan sponsor or insurer to the
 28 extent the plan, fund, or program is established, adopted, or
 29 maintained to provide indemnification or expense reimbursement
 30 for any type of life, health, or accident benefit. For
 31 purposes of this definition, the term "plan sponsor" means a

1 person, other than an insurer, who establishes, adopts, or
2 maintains a plan that covers residents of this state,
3 including a plan established, adopted, or maintained by two or
4 more employers or jointly by one or more employers and one or
5 more employee organizations, an association, a committee, a
6 joint board of trustees, or any similar group or
7 representative who establishes, adopts, or maintains a plan.

8 (b)1. Except as provided by rules adopted by the
9 Department of Insurance, an administrator for a plan that
10 provides pharmacy benefits shall issue an identification card
11 to each individual covered by the plan.

12 2. The Department of Insurance shall adopt standard
13 information to be included on the identification card. At
14 minimum, the standard form for the identification card shall
15 include:

16 a. The name or logo of the entity that is
17 administering the pharmacy benefits.

18 b. The International Identification Number that is
19 assigned by the American National Standards Institute for the
20 entity that is administering the pharmacy benefits.

21 c. The group number applicable to the individual.

22 d. The effective date of the coverage evidenced by the
23 card.

24 e. A telephone number to be used to contact an
25 appropriate person to obtain information relating to the
26 pharmacy benefits provided under the coverage.

27 f. Copayment information for generic and brand-name
28 prescription drugs.

29 3. An administrator for a plan that provides pharmacy
30 benefits shall issue an identification card to an individual
31 not later than the 30th day after the date the administrator

1 receives notice that the individual is eligible for the
2 benefits.

3 (c)1. A pharmacy benefit manager may not sell any list
4 of patients that contains information through which the
5 identities of individual patients are disclosed.

6 2. All data maintained by the pharmacy benefit manager
7 that identifies a patient shall be maintained in a
8 confidential manner that prevents disclosure to third parties,
9 unless the disclosure is otherwise authorized by law or by the
10 patient.

11 3. This paragraph does not prohibit:

12 a. General advertising about a specific pharmaceutical
13 product or service;

14 b. A person from requesting and receiving information
15 regarding a specific pharmaceutical product or service; or

16 c. A person from requesting and receiving information
17 regarding the person's own records or claims, or information
18 regarding the person's dependent's records or claims.

19 (d)1. This subsection applies only to a person acting
20 as an administrator with respect to pharmacy benefits on or
21 after January 1, 2000. A person acting as an administrator
22 with respect to pharmacy benefits before January 1, 2000, is
23 governed by the law as it existed immediately prior to the
24 effective date of this act and that law is continued in effect
25 for that purpose.

26 2. An administrator is not required to issue a new
27 identification card to an individual, as required by paragraph
28 (b), if the identification card held by the individual on the
29 effective date of this act contains the elements described in
30 sub-subparagraphs (b)2.b., c., d., and e. A new card
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1 complying with paragraph (b) shall be issued at the time the
2 individual's coverage is modified.

3 (2)(a)1. This subsection applies to any health benefit
4 plan which provides benefits for medical or surgical expenses
5 incurred as a result of a health condition, accident, or
6 sickness, including an individual, group, blanket, or
7 franchise insurance policy or insurance agreement, a group
8 hospital service contract, or an individual or group evidence
9 of coverage or similar coverage document that is offered by
10 any of the following entities operating under the Florida
11 Insurance Code:

12 a. An insurance company.

13 b. A group hospital service corporation.

14 c. A fraternal benefit society.

15 d. A stipulated premium insurance company.

16 e. A reciprocal exchange.

17 f. A health maintenance organization.

18 g. A multiple employer welfare arrangement.

19 h. An approved nonprofit health corporation.

20 2. This subsection does not apply to:

21 a. A plan that provides coverage:

22 (I) Only for a specified disease or other limited
23 benefit;

24 (II) Only for accidental death or dismemberment;

25 (III) For wages or payments in lieu of wages for a
26 period during which an employee is absent from work because of
27 sickness or injury;

28 (IV) As a supplement to liability insurance;

29 (V) For credit insurance;

30 (VI) Only for dental or vision care;

31 (VII) Only for hospital expenses; or

1 (VIII) Only for indemnity for hospital confinement;
2 b. A small employer health benefit plan;
3 c. A Medicare supplemental policy as defined by s.
4 1882(g)(1) of the Social Security Act (42 U.S.C. s. 1395ss);
5 d. Workers' compensation insurance coverage;
6 e. Medical payment insurance coverage issued as part
7 of a motor vehicle insurance policy; or
8 f. A long-term care policy, including a nursing home
9 fixed indemnity policy, unless the Insurance Commissioner
10 determines that the policy provides benefit coverage so
11 comprehensive that the policy is a health benefit plan as
12 described in subparagraph 1.
13 (b) A health benefit plan that provides pharmacy
14 benefits for enrollees in the plan shall include on the
15 identification card of each enrollee:
16 1. The name or logo of the entity that is
17 administering the pharmacy benefits, if different from the
18 health benefit plan.
19 2. The group number applicable to the individual.
20 3. The effective date of the coverage evidenced by the
21 card.
22 4. A telephone number to be used to contact an
23 appropriate person to obtain information relating to the
24 pharmacy benefits provided under the coverage.
25 5. Copayment information for generic and brand-name
26 prescription drugs.
27 (c) This subsection does not require a health benefit
28 plan that administers its own pharmacy benefits to issue an
29 identification card separate from any identification card
30 issued to an enrollee to evidence coverage under the health
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1 benefit plan, if the identification card contains the elements
2 required by paragraph (b).

3 (d) A health benefit plan is not required to issue a
4 new identification card to an enrollee, as required by
5 paragraph (b), if the identification card held by the enrollee
6 on the effective date of this act contains the elements
7 described by subparagraphs (b)2., 3., 4., and 5. A new card
8 complying with paragraph (b) shall be issued at the time the
9 enrollee's coverage is modified.

10 (3) RULES.--The Department of Insurance shall adopt
11 any rules necessary to implement this act.

12 Section 2. This act shall take effect upon becoming a
13 law.

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15 HOUSE SUMMARY

16 Requires insurance plans and health benefit plans which
17 provide pharmacy benefits to provide identification cards
18 disclosing information relating to pharmacy benefits
19 under the plan to covered individuals or enrollees. See
20 bill for details.

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