Florida House of Representatives - 2000

HB 2061

By the Committee on Insurance and Representatives Bainter, Cosgrove, Waters, Patterson, Rayson, Melvin, Wiles, Dockery, Tullis, Lawson, Lee, Goode, Sublette, Casey, Crady, Bronson, Trovillion, Kelly, Argenziano and Futch

1	A bill to be entitled
2	An act relating to mandated health benefits;
3	creating s. 11.90, F.S.; creating the Advisory
4	Commission on Mandated Health Benefits;
5	specifying the purpose and membership of the
6	commission; prescribing duties and
7	responsibilities of the commission; amending s.
8	624.215, F.S.; revising legislative intent;
9	providing a definition; revising reporting
10	requirements; providing for criteria for
11	assessing social and financial impacts;
12	providing for automatic repeal of mandated
13	health benefits; providing an exception;
14	providing an appropriation; 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. Section 11.90, Florida Statutes, is created
20	to read:
21	11.90 Advisory Commission on Mandated Health
22	Benefits
23	(1) The Advisory Commission on Mandated Health
24	Benefits is created for the purpose of reviewing legislation
25	proposing mandated health benefits and managing the cumulative
26	impact of mandated health benefits. The commission shall be
27	comprised of six members appointed as follows: three members
28	of the Senate appointed by the President of the Senate, one of
29	whom must be a member of the minority party; and three members
30	of the House of Representatives appointed by the Speaker of
31	the House of Representatives, one of whom must be a member of
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the minority party. The chair and vice chair of the 1 2 commission shall be appointed from the commission membership 3 by the President of the Senate and the Speaker of the House of Representatives for 1-year terms with the appointments 4 5 alternating between the President of the Senate and the б Speaker of the House of Representatives. 7 (2) The commission shall: 8 (a) Compile an official inventory of all mandated 9 health benefits as defined in s. 624.215(2). 10 (b) Monitor the cumulative cost impact of mandated 11 health benefits as a percentage of premiums on an ongoing 12 basis, beginning with the establishment of a baseline cost 13 impact for mandated health benefits in effect as of October 1, 14 2000. The commission shall contract for actuarial or other professional services through the Office of Economic and 15 16 Demographic Research for the completion of the baseline cost impact analysis and in identifying the primary beneficial 17 social and health consequences. 18 (c) Assess the impact of legislation proposing 19 20 mandated health benefits, in accordance with s. 624.215, if proponents submit an impact assessment meeting the 21 requirements of that section and rules adopted by the 22 commission. The commission may contract with actuaries and 23 other professionals through the Office of Economic and 24 25 Demographic Research to conduct the impact assessments and may 26 establish ad hoc panels of experts to assist in the assessment 27 process. 28 (d) Certify that legislation proposing mandated health benefits has satisfied requirements specified in s. 624.215, 29 and in rules adopted by the commission. 30 31

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(e) Adopt rules governing commission operations and 1 2 procedures for reviewing legislation proposing mandated health 3 benefits, including the format and timing of information to be 4 submitted to the commission. These rules must be submitted to 5 the President of the Senate and the Speaker of the House of б Representatives for approval. 7 (f) As warranted, after receipt and consideration of 8 the baseline cost impact assessment conducted pursuant to 9 paragraph (b), recommend legislation to manage the impacts of mandated health benefits, including legislation to repeal or 10 11 amend particular mandated health benefits, convert some or all 12 mandated health benefits to mandatory offers of coverage, 13 adjust the mix of mandated health benefits to comply with any 14 limits imposed on the percentage of total premium that 15 mandated health benefits may represent, or create additional 16 mandated health benefits. (g) As warranted, recommend and develop legislation 17 necessary to resolve any statutory ambiguities or 18 19 inconsistencies creating interpretative differences over the 20 application of particular mandated health benefits to insurance policies or health maintenance organization 21 22 contracts. 23 (h) Recommend a limit on the percentage of total 24 premium costs that mandated health benefits in the aggregate 25 may represent based on the baseline cost impact assessment 26 conducted pursuant to paragraph (b). 27 (3) The Office of Economic and Demographic Research 28 shall develop and maintain a system and program of data collection to enable the commission to assess the cumulative 29 impact of mandated health benefits on an ongoing basis and the 30 impact of legislation proposing mandated health benefits. 31

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1 (4) The commission shall not be considered an agency 2 or part of an agency for purposes of chapter 120. 3 Section 2. Section 624.215, Florida Statutes, is 4 amended to read: 5 624.215 Proposals for legislation which mandates б health benefit coverage; review by Legislature .--7 (1) LEGISLATIVE INTENT.--The Legislature finds that 8 there has been a dramatic increase in the is an increasing number of proposals which mandate that certain health benefits 9 be provided by insurers and health maintenance organizations 10 as components of individual and group policies. The 11 Legislature further finds that many of these mandated health 12 13 benefits provide beneficial social and health consequences 14 which may be in the public interest. However, the Legislature also finds recognizes that most mandated health benefits 15 contribute to the increasing cost of health insurance 16 premiums. Therefore, it is the intent of the Legislature to 17 conduct a systematic review of current and proposed mandated 18 19 health benefits or mandatorily offered health coverages and to 20 establish a process guidelines for conducting such a review. This review will assist the Legislature in determining whether 21 22 or not a particular mandated health benefit mandating a particular coverage is in the public interest. 23 24 (2) DEFINITION.--For purposes of this section, "mandated health benefits" are requirements imposed upon 25 26 health benefit plans offered by health insurers or health 27 maintenance organizations to provide their insureds, 28 policyholders, or subscribers with coverage for specific health care services, treatments, drugs, or supplies; 29 particular health conditions; certain providers of health care 30 services; or certain persons because of their relation to the 31

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covered individual. "Mandated health benefits" includes 1 2 requirements to offer or make available optional coverages. 3 (3)(2) MANDATED HEALTH BENEFITS COVERAGE; REPORT TO 4 ADVISORY COMMISSION ON MANDATED HEALTH BENEFITS AGENCY FOR 5 HEALTH CARE ADMINISTRATION AND LEGISLATIVE COMMITTEES; б CRITERIA GUIDELINES FOR ASSESSING IMPACT. -- Every person or 7 organization seeking consideration of legislation containing a 8 mandated health benefit must submit to the Advisory Commission 9 on Mandated Health Benefits, at the time the proposal is filed 10 in either house, an impact assessment of the proposal conducted by certified actuaries and other appropriate 11 12 professionals using the criteria set forth in this subsection. 13 If the proponents submit an impact assessment meeting the 14 requirements of this section and rules adopted by the 15 commission, the commission shall prepare its own impact assessment and, upon completion, submit its assessment to the 16 presiding officers of both houses. In preparing its own 17 assessment, the commission shall consider the assessment 18 19 submitted by proponents of the proposed mandated health 20 benefit and similar assessments conducted by other entities, including state agencies, insurers, and health maintenance 21 22 organizations. The criteria used by proponents and the 23 commission in assessing the social and financial impacts of 24 proposed mandated health benefits a legislative proposal which 25 would mandate a health coverage or the offering of a health 26 coverage by an insurance carrier, health care service 27 contractor, or health maintenance organization as a component 28 of individual or group policies, shall submit to the Agency 29 for Health Care Administration and the legislative committees having jurisdiction a report which assesses the social and 30 31 financial impacts of the proposed coverage. Guidelines for 5

available, shall include:

generally available.

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assessing the impact of a proposed mandated or mandatorily offered health coverage, to the extent that information is (a) For the social impact: 1.(a) To what extent is the treatment or service generally used by a significant portion of the population. 2.(b) To what extent is the insurance coverage

9 3.(c) If the insurance coverage is not generally 10 available, to what extent does the lack of coverage result in 11 persons avoiding necessary health care treatment.

12 4.(d) If the coverage is not generally available, to 13 what extent does the lack of coverage result in unreasonable 14 financial hardship.

15 5.(e) The level of public demand for the treatment or 16 service.

6.(f) The level of public demand for insurance 17 18 coverage of the treatment or service.

19 7.(g) The level of interest of collective bargaining 20 agents in negotiating for the inclusion of this coverage in group contracts. 21

22 8. To what extent can the expressed need be met 23 through other alternatives.

(b) For the financial impact:

25 1.(h) To what extent will the coverage increase or 26 decrease the cost of the treatment or service.

27 2.(i) To what extent will the coverage increase the 28 appropriate uses of the treatment or service.

29 3.(j) To what extent will the mandated treatment or 30 service be a substitute for a more expensive treatment or 31 service.

4.(k) To what extent will the coverage increase or 1 2 decrease the administrative expenses of insurance companies 3 and the premium and administrative expenses of policyholders 4 or subscribers. 5 5. To what extent will the coverage increase or б decrease the premium costs of policyholders or subscribers. 7 6.(1) The impact of this coverage on the total cost of 8 health care. 9 7. The cumulative impact of all mandated health benefits on the ability and willingness of employers to 10 11 purchase health benefit plans for their employees, or maintain 12 or improve the terms of coverage for their employees. 13 14 A bill proposing a mandated health benefit shall not be 15 considered by any committee in the Senate or the House of Representatives unless and until the commission has submitted 16 its impact assessment to the presiding officers of the Senate 17 and the House of Representatives, except as otherwise provided 18 19 in joint rules adopted by the Senate and the House of 20 Representatives or in rules applicable to either the Senate or 21 the House of Representatives. 22 (4) AUTOMATIC REPEAL OF MANDATED HEALTH BENEFITS.--(a) Any mandated health benefit enacted on or after 23 24 July 1, 2000, shall stand repealed 5 years after the date 25 enacted, unless otherwise reenacted by the Legislature. 26 (b) The repeal of a mandated health benefit under 27 paragraph (a) shall not apply to an insurance policy or health 28 maintenance organization contract in existence on the 29 effective date of the repeal but shall apply to any renewal or extension of such policy or contract, or issuance of any new 30 31

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policy or contract, on or after the effective date of the repealer. Section 3. There is hereby appropriated from the Insurance Commissioner's Regulatory Trust Fund an amount sufficient to implement this act. Section 4. This act shall take effect upon becoming a law. HOUSE SUMMARY Creates the Advisory Commission on Mandated Health Benefits to review legislation proposing mandated health benefits and manage the impacts of such benefits. Defines mandated health benefits, requires any person or organization seeking consideration of legislation proposing a mandated health benefit to submit an impact assessment to the commission, and specifies criteria to assess the social and financial impacts of such proposed mandated health benefits. See bill for details.