

Amendment No. ____ (for drafter's use only)

	<u>Senate</u>	CHAMBER ACTION	<u>House</u>
1		.	
2		.	
3		.	
4		.	

ORIGINAL STAMP BELOW

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31

Representative(s) Bucher and Sobel offered the following:

Amendment (with title amendment)

On page 12, between lines 22 and 23 of the bill

insert:

(f) Notwithstanding the provisions of paragraph (d), a health maintenance organization shall only pay a 5 percent simple interest rate for an overdue payment of a claim for voluntarily complying with the contractually provided subscriber rights listed below:

1. A health maintenance organization shall ensure that the health care services provided to its subscribers shall be rendered under reasonable standards of quality of care which are at a minimum consistent with the prevailing standards of medical practice in the community pursuant to ss. 641.495(1) and 641.51.

2. A health maintenance organization subscriber shall receive quality health care from a broad panel of providers, including referrals, preventive care pursuant to s. 641.402(1), emergency screening and services pursuant to ss.

Amendment No. ____ (for drafter's use only)

1 641.31(12) and 641.513, and second opinions pursuant to s.
2 641.51.

3 3. A health maintenance organization subscriber shall
4 receive assurance that the health maintenance organization has
5 been independently accredited by a national review
6 organization pursuant to s. 641.512, and is financially secure
7 as determined by the state pursuant to ss. 641.221, 641.225,
8 and 641.228.

9 4. A health maintenance organization subscriber shall
10 receive continuity of health care, even after the provider is
11 no longer with the health maintenance organization pursuant to
12 s. 641.51(7).

13 5. A health maintenance organization subscriber shall
14 receive timely, concise information regarding the health
15 maintenance organization's reimbursement to providers and
16 services pursuant to ss. 641.31 and 641.31015.

17 6. A health maintenance organization subscriber shall
18 receive the flexibility to transfer to another Florida health
19 maintenance organization, regardless of health status,
20 pursuant to ss. 641.3104, 641.3107, 641.3111, 641.3921,
21 641.3922, and 641.228.

22 7. A health maintenance organization subscriber shall
23 be eligible for coverage without discrimination against
24 individual participants and beneficiaries of group plans based
25 on health status pursuant to s. 641.31073.

26 8. A health maintenance organization that issues a
27 group health contract must: provide coverage for preexisting
28 conditions pursuant to s. 641.31071; guarantee renewability of
29 coverage pursuant to s. 641.31074; provide notice of
30 cancellation pursuant to s. 641.3108; provide extension of
31 benefits pursuant to s. 641.3111; provide for conversion on

Amendment No. ____ (for drafter's use only)

1 termination of eligibility pursuant to s. 641.3921; and
2 provide for conversion contracts and conditions pursuant to s.
3 641.3922.

4 9. A health maintenance organization subscriber shall
5 receive timely, and, if necessary, urgent grievances and
6 appeals within the health maintenance organization pursuant to
7 ss. 641.228, 641.31(5), 641.47, and 641.511.

8 10. A health maintenance organization shall receive
9 timely and, if necessary, urgent review by an independent
10 state external review organization for unresolved grievances
11 and appeals pursuant to s. 408.7056.

12 11. A health maintenance organization subscriber shall
13 be given written notice at least 30 days in advance of a rate
14 change pursuant to s. 641.31(3)(b). In the case of a group
15 member, there may be a contractual agreement with the health
16 maintenance organization to have the employer provide the
17 required notice to the individual members of the group
18 pursuant to s. 641.31(3)(b).

19 12. A health maintenance organization subscriber shall
20 be given a copy of the applicable health maintenance contract,
21 certificate, or member handbook specifying: all the
22 provisions, disclosure, and limitations required pursuant to
23 s. 641.31(1) and (4); the covered services, including those
24 services, medical conditions, and provider types specified in
25 ss. 641.31, 641.31094, 641.31095, 641.31096, 641.51(10), and
26 641.513; and where and in what manner services may be obtained
27 pursuant to s. 641.31(4).

28 13. The subscriber's right under ss. 641.31 and
29 641.513 to receive emergency services for emergency medical
30 conditions without having to obtain prior authorization or
31 face any other restriction prohibited by law.

Amendment No. ____ (for drafter's use only)

1 14. The subscriber's right under ss.641.19 and 641.51
2 to see a gynecologist or obstetrician without first having to
3 get a referral from her primary care physician.

4 15. The subscriber's right under 641.441 to receive
5 from the health maintenance organization prompt decisions
6 about and treatment of life-threatening conditions.

7 16. The subscriber's right under ss.641.315 and
8 641.3903 to a physician who cannot be penalized by the health
9 maintenance organization for fully informing the subscriber
10 about all medical information that the physician thinks the
11 subscriber needs to know about his or her medical condition
12 and treatment options.

13 17. The subscriber's right under s. 641.31073 to be
14 free from discrimination in the determination as to the
15 subscriber's eligibility to participate in the plan.

16
17
18 ===== T I T L E A M E N D M E N T =====

19 And the title is amended as follows:

20 On page 2, line 9

21
22 after the semicolon insert:

23 providing incentive for health maintenance
24 organizations to provide certain rights to
25 subscribers; providing health maintenance
26 organization subscriber protections; requiring
27 that a health maintenance organization observe
28 certain standards in providing health care for
29 subscribers; providing for subscribers to
30 receive quality care from a broad panel of
31 providers, referrals, preventive care,

Amendment No. ____ (for drafter's use only)

1 emergency screening services, and second
2 opinions; providing for assurance of
3 independent accreditation by a national review
4 organization and financial security of the
5 organization; providing for continuity of
6 health care; providing for timely, concise
7 information regarding reimbursement to
8 providers and services; providing for
9 flexibility to transfer to another health
10 maintenance organization within the state;
11 providing for eligibility without
12 discrimination based on health status;
13 providing requirements for health maintenance
14 organizations that issue group health contracts
15 relating to preexisting conditions, contract
16 renewability, cancellation, extension,
17 termination, and conversion; providing for
18 timely, urgent grievances and appeals within
19 the organization; providing for timely and
20 urgent review of grievances and appeals by an
21 independent state external review agency;
22 providing for notice of rate changes; providing
23 for information regarding contract provisions,
24 services, medical conditions, providers, and
25 service delivery;

26
27
28
29
30
31