

By Senator Crist

13-391-01

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A bill to be entitled
An act relating to insurance and health care
service organizations; amending ss. 626.9541,
641.3903, F.S.; prohibiting coercion or certain
other actions against a provider who does not
participate in other plans or programs of the
insurer or organization; providing an effective
date.

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

Section 1. Paragraphs (bb) and (cc) are added to
subsection (1) of section 626.9541, Florida Statutes, to read:

626.9541 Unfair methods of competition and unfair or
deceptive acts or practices defined.--

(1) UNFAIR METHODS OF COMPETITION AND UNFAIR OR
DECEPTIVE ACTS.--The following are defined as unfair methods
of competition and unfair or deceptive acts or practices:

(bb) Coercion by health insurance plans.--Requiring a
health care provider, as a condition of participation in a
health insurance plan or insurance product of the entity, to
participate in any of the entity's or its affiliates' other
health insurance plans, insurance products, or health
maintenance organization plans that have different terms,
conditions, or levels of payment. In addition to any other
penalty, a provision of any contract that violates this
paragraph is void.

(cc) Adverse action against a provider.--Any
retaliatory action by an insurer against a contracted
provider, including termination of a contract with the
provider on the basis that the provider did not participate in

1 any of the insurer's other health insurance plans, insurance
2 products, or health maintenance organization plans that have
3 different terms, conditions, or levels of payment.

4 Section 2. Subsection (14) of section 641.3903,
5 Florida Statutes, is amended and subsection (15) is added to
6 that section to read:

7 641.3903 Unfair methods of competition and unfair or
8 deceptive acts or practices defined.--The following are
9 defined as unfair methods of competition and unfair or
10 deceptive acts or practices:

11 (14) ADVERSE ACTION AGAINST A PROVIDER.--Any
12 retaliatory action by a health maintenance organization
13 against a contracted provider, including, but not limited to,
14 termination of a contract with the provider, on the basis that
15 the provider communicated information to the provider's
16 patient regarding medical care or treatment options for the
17 patient when the provider deems knowledge of such information
18 by the patient to be in the best interest of the patient or on
19 the basis that the provider did not participate in any of the
20 health maintenance organization's or its affiliates' other
21 health insurance plans, insurance products, or health
22 maintenance organization plans that have different terms,
23 conditions, or levels of payment.

24 (15) COERCION BY HEALTH MAINTENANCE
25 ORGANIZATIONS.--Requiring a health care provider, as a
26 condition of participation in a health maintenance
27 organization, to participate in any of the organization's or
28 its affiliates' other health maintenance organization plans,
29 health insurance plans or insurance products that have
30 different terms, conditions, or levels of payment. In addition
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1 to any other penalty, a provision of any contract that
2 violates this subsection is void.

3 Section 3. This act shall take effect July 1, 2001.

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6 SENATE SUMMARY

7 Prohibits an insurer or health care service organization
8 from coercing providers or taking adverse action against
9 health care providers who do not participate in other
10 plans or programs offered by the insurer or organization.

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