

Amendment No. 10 (for drafter's use only)

	<u>Senate</u>	CHAMBER ACTION	<u>House</u>
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ORIGINAL STAMP BELOW

11 Representative(s) Farkas offered the following:

13 **Amendment**

14 On page 8, line 10, through page 12, line 6,
15 remove: all of said lines

17 and insert:

18 (d)1. Upon offering coverage under a standard health
19 benefit plan, a basic health benefit plan, or a flexible
20 ~~limited~~ benefit policy or contract for any small employer, the
21 small employer carrier shall disclose in writing to the
22 ~~provide such employer group with a written statement that~~
23 ~~contains, at a minimum:~~

24 ~~a. An explanation of those mandated benefits and~~
25 ~~providers that are not covered by the policy or contract;~~

26 ~~a.b. An outline of coverage together explanation of~~
27 ~~the managed care and cost control features of the policy or~~
28 ~~contract, along with all appropriate mailing addresses and~~
29 ~~telephone numbers to be used by insureds in seeking~~
30 ~~information or authorization. and~~

31 b.c. ~~An explanation of~~ The primary and preventive care

1 features of the policy or contract.

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3 Such disclosure statement must be presented in a clear and
4 understandable form and format and must be separate from the
5 policy or certificate or evidence of coverage provided to the
6 employer group.

7 ~~2. Before a small employer carrier issues a standard~~
8 ~~health benefit plan, a basic health benefit plan, or a limited~~
9 ~~benefit policy or contract, it must obtain from the~~
10 ~~prospective policyholder a signed written statement in which~~
11 ~~the prospective policyholder:~~

12 ~~a. Certifies as to eligibility for coverage under the~~
13 ~~standard health benefit plan, basic health benefit plan, or~~
14 ~~limited benefit policy or contract;~~

15 ~~c.b. Acknowledges The limited nature of the coverage~~
16 ~~and an understanding of the managed care and cost control~~
17 ~~features of the policy or contract.~~

18 ~~d. A listing of specific health care services or~~
19 ~~benefits enumerated in ss. 627.6574, 627.66121, 627.66122,~~
20 ~~627.6616, 627.6618, 627.668, 627.66911, and 627.6699(12)(b)4.,~~
21 ~~not provided as a covered service or benefit.~~

22 ~~c. Acknowledges that if misrepresentations are made~~
23 ~~regarding eligibility for coverage under a standard health~~
24 ~~benefit plan, a basic health benefit plan, or a limited~~
25 ~~benefit policy or contract, the person making such~~
26 ~~misrepresentations forfeits coverage provided by the policy or~~
27 ~~contract; and~~

28 ~~2.d. If a flexible benefit policy or contract limited~~
29 ~~plan is requested, the prospective policyholder must~~
30 ~~acknowledge in writing acknowledges that he or she the~~
31 ~~prospective policyholder had been offered, at the time of~~

1 application for the insurance policy or contract, the
2 opportunity to purchase any health benefit plan offered by the
3 carrier and that the prospective policyholder had rejected
4 that coverage.

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6 ~~A copy of such written statement shall be provided to the
7 prospective policyholder no later than at the time of delivery
8 of the policy or contract, and the original of such written
9 statement shall be retained in the files of the small employer
10 carrier for the period of time that the policy or contract
11 remains in effect or for 5 years, whichever period is longer.~~

12 ~~3. Any material statement made by an applicant for
13 coverage under a health benefit plan which falsely certifies
14 as to the applicant's eligibility for coverage serves as the
15 basis for terminating coverage under the policy or contract.~~

16 ~~3.4. Each marketing communication that is intended to
17 be used in the marketing of a health benefit plan in this
18 state must be submitted for review by the department prior to
19 use and must contain the disclosures stated in this
20 subsection.~~

21 4. The contract, policy, and certificates evidencing
22 coverage under a flexible benefit policy or contract and the
23 application for coverage under such plans must state in not
24 less than 10-point type on the first page in contrasting color
25 the following: "The benefits provided by this health plan are
26 limited and may not cover all of your medical needs. You
27 should carefully review the benefits offered under this health
28 plan."

29 (e) A small employer carrier may not use any policy,
30 contract, form, or rate under this section, including
31 applications, enrollment forms, policies, contracts,

1 certificates, evidences of coverage, riders, amendments,
2 endorsements, and disclosure forms, until the carrier insurer
3 has filed it with the department and the department has
4 approved it under ss. 627.410, and 627.411, and 641.31 and
5 this section.

6 (f) A flexible benefit policy or contract must have an
7 annual maximum benefit of \$10,000 or greater and such benefit
8 shall be disclosed in 10-point type in contrasting color.

9 (g) A mandatory offer for catastrophic coverage shall
10 be provided by the carriers to employers whenever a flexible
11 benefit policy or contract is offered.

12 (h) An insurer may not condition the payment of
13 benefits offered under a flexible policy, in whole or in part,
14 on the use of exclusive providers of an exclusive provider
15 organization certified under s. 627.6472.

16 (15) APPLICABILITY OF OTHER STATE LAWS.--

17 (a) Except as expressly provided in this section, a
18 law requiring coverage for a specific health care service or
19 benefit, or a law requiring reimbursement, utilization, or
20 consideration of a specific category of licensed health care
21 practitioner, does not apply to a standard or basic health
22 benefit plan policy or contract or a flexible limited benefit
23 policy or contract offered or delivered to a small employer
24 unless that law is made expressly applicable to such policies
25 or contracts. A law restricting or limiting deductibles,
26 coinsurance, copayments, or annual or lifetime maximum
27 payments does not apply to any health plan policy, including a
28 standard or basic health benefit plan policy or contract or a
29 flexible benefit policy or contract, offered or delivered to a
30 small employer unless such law is made expressly applicable to
31 such policy or contract. The provisions of s. 627.419(2), (3),

1 and (4) apply to a flexible benefit policy or contract offered
2 or delivered to a small employer.

3 (b) Except as provided in this section, a standard or
4 basic health benefit plan policy or contract or flexible
5 ~~limited~~ benefit policy or contract offered to a small employer
6 is not subject to any provision of this code which:

7 1. Inhibits a small employer carrier from contracting
8 with providers or groups of providers with respect to health
9 care services or benefits;

10 2. Imposes any restriction on a small employer
11 carrier's ability to negotiate with providers regarding the
12 level or method of reimbursing care or services provided under
13 a health benefit plan; or

14 3. Requires a small employer carrier to either include
15 a specific provider or class of providers when contracting for
16 health care services or benefits or to exclude any class of
17 providers that is generally authorized by statute to provide
18 such care.

19 (c) Any second tier assessment paid by a carrier
20 pursuant to paragraph (11)(j) may be credited against
21 assessments levied against the carrier pursuant to s.
22 627.6494.

23 (d) Notwithstanding chapter 641, a health maintenance
24 organization is authorized to issue contracts providing
25 benefits equal to the standard health benefit plan, the basic
26 health benefit plan, and the flexible ~~limited~~ benefit policy
27 or contract

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