

Bill No. CS for SB 822

Barcode 280188

CHAMBER ACTION

Senate

House

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

WD/2R
04/27/2005 11:09 AM

.
. .
. .
. .
. .
. .

Senator Bullard moved the following amendment:

Senate Amendment (with title amendment)

On page 14, between lines 26 and 27,

insert:

Section 2. Section 627.64194, Florida Statutes, is created to read:

627.64194 Services for the treatment of congenital craniofacial anomalies.--A health insurance policy sold in this state must provide coverage for all medically appropriate and necessary equipment, supplies, supplements, and patient self-management training and educational services used to treat a congenital craniofacial anomaly if the patient's treating physician or a physician who specializes in the treatment of craniofacial anomalies certifies that such services are necessary.

Section 3. Section 627.6614, Florida Statutes, is created to read:

627.6614 Services for the treatment of congenital craniofacial anomalies.--A group health insurance policy sold

Bill No. CS for SB 822

Barcode 280188

1 in this state must provide coverage for all medically
 2 appropriate and necessary equipment, supplies, supplements,
 3 and patient self-management training and educational services
 4 used to treat a congenital craniofacial anomaly if the
 5 patient's treating physician or a physician who specializes in
 6 the treatment of craniofacial anomalies certifies that such
 7 services are necessary.

8 Section 4. Present subsections (36), (37), (38), (39),
 9 and (40) of section 641.31, Florida Statutes, are redesignated
 10 as subsections (37), (38), (39), (40), and (41), respectively,
 11 and a new subsection (36) is added to that section to read:

12 641.31 Health maintenance contracts.--

13 (36) A health maintenance contract sold in this state
 14 must provide coverage for all medically appropriate and
 15 necessary equipment, supplies, supplements, and patient
 16 self-management training and educational services used to
 17 treat a congenital craniofacial anomaly if the patient's
 18 treating physician or a physician who specializes in the
 19 treatment of craniofacial anomalies certifies that such
 20 services are necessary.

21 Section 5. Subsection (2) of section 627.6515, Florida
 22 Statutes, is amended to read:

23 627.6515 Out-of-state groups.--

24 (2) Except as otherwise provided in this part, this
 25 part does not apply to a group health insurance policy issued
 26 or delivered outside this state under which a resident of this
 27 state is provided coverage if:

28 (a) The policy is issued to an employee group the
 29 composition of which is substantially as described in s.
 30 627.653; a labor union group or association group the
 31 composition of which is substantially as described in s.

Bill No. CS for SB 822

Barcode 280188

1 627.654; an additional group the composition of which is
 2 substantially as described in s. 627.656; a group insured
 3 under a blanket health policy when the composition of the
 4 group is substantially in compliance with s. 627.659; a group
 5 insured under a franchise health policy when the composition
 6 of the group is substantially in compliance with s. 627.663;
 7 an association group to cover persons associated in any other
 8 common group, which common group is formed primarily for
 9 purposes other than providing insurance; a group that is
 10 established primarily for the purpose of providing group
 11 insurance, provided the benefits are reasonable in relation to
 12 the premiums charged thereunder and the issuance of the group
 13 policy has resulted, or will result, in economies of
 14 administration; or a group of insurance agents of an insurer,
 15 which insurer is the policyholder;

16 (b) Certificates evidencing coverage under the policy
 17 are issued to residents of this state and contain in
 18 contrasting color and not less than 10-point type the
 19 following statement: "The benefits of the policy providing
 20 your coverage are governed primarily by the law of a state
 21 other than Florida"; and

22 (c) The policy provides the benefits specified in ss.
 23 627.419, 627.6574, 627.6575, 627.6579, 627.6612, 627.66121,
 24 627.66122, 627.6613, 627.6614, 627.667, 627.6675, 627.6691,
 25 and 627.66911.

26 (d) Applications for certificates of coverage offered
 27 to residents of this state must contain, in contrasting color
 28 and not less than 12-point type, the following statement on
 29 the same page as the applicant's signature:
 30

31 "This policy is primarily governed by the laws

Bill No. CS for SB 822

Barcode 280188

1 of ...insert state where the master policy if
 2 filed.... As a result, all of the rating laws
 3 applicable to policies filed in this state do
 4 not apply to this coverage, which may result in
 5 increases in your premium at renewal that would
 6 not be permissible under a Florida-approved
 7 policy. Any purchase of individual health
 8 insurance should be considered carefully, as
 9 future medical conditions may make it
 10 impossible to qualify for another individual
 11 health policy. For information concerning
 12 individual health coverage under a
 13 Florida-approved policy, consult your agent or
 14 the Florida Department of Financial Services."
 15

16 This paragraph applies only to group certificates providing
 17 health insurance coverage which require individualized
 18 underwriting to determine coverage eligibility for an
 19 individual or premium rates to be charged to an individual
 20 except for the following:

21 1. Policies issued to provide coverage to groups of
 22 persons all of whom are in the same or functionally related
 23 licensed professions, and providing coverage only to such
 24 licensed professionals, their employees, or their dependents;

25 2. Policies providing coverage to small employers as
 26 defined by s. 627.6699. Such policies shall be subject to, and
 27 governed by, the provisions of s. 627.6699;

28 3. Policies issued to a bona fide association, as
 29 defined by s. 627.6571(5), provided that there is a person or
 30 board acting as a fiduciary for the benefit of the members,
 31 and such association is not owned, controlled by, or otherwise

Bill No. CS for SB 822

Barcode 280188

1 associated with the insurance company; or

2 4. Any accidental death, accidental death and
3 dismemberment, accident-only, vision-only, dental-only,
4 hospital indemnity-only, hospital accident-only, cancer,
5 specified disease, Medicare supplement, products that
6 supplement Medicare, long-term care, or disability income
7 insurance, or similar supplemental plans provided under a
8 separate policy, certificate, or contract of insurance, which
9 cannot duplicate coverage under an underlying health plan,
10 coinsurance, or deductibles or coverage issued as a supplement
11 to workers' compensation or similar insurance, or automobile
12 medical-payment insurance.

13

14 (Redesignate subsequent sections.)

15

16

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

18 And the title is amended as follows:

19 Delete everything before the enacting clause

20

21 and insert:

22

 A bill to be entitled

23

 An act relating to insurance; amending s.

24

 110.123, F.S.; revising the terms "state group

25

 insurance program" and "surviving spouse" and

26

 defining the term "TRICARE supplemental

27

 insurance plan"; including the TRICARE

28

 supplemental insurance plan within the state

29

 group insurance program; requiring the

30

 Department of Management Services to purchase

31

 health care for employees under the TRICARE

Bill No. CS for SB 822

Barcode 280188

1 supplemental insurance plan; authorizing a
2 surviving spouse to elect to continue coverage
3 under the TRICARE supplemental insurance plan;
4 providing that an enrollee in the TRICARE
5 supplemental insurance plan may change to any
6 other state health plan during open enrollment;
7 creating ss. 627.64194 and 627.6614, F.S.;
8 requiring an individual health insurance policy
9 or a group health insurance policy to cover
10 services needed to treat congenital
11 craniofacial anomalies as authorized by a
12 physician; amending s. 641.31, F.S.; requiring
13 a contract by a health maintenance organization
14 to cover services needed to treat congenital
15 craniofacial anomalies as authorized by a
16 physician; amending s. 627.6515, F.S., relating
17 to out-of-state groups; conforming a
18 cross-reference to changes made by the act;
19 providing an effective date.
20
21
22
23
24
25
26
27
28
29
30
31