

1 A bill to be entitled
2 An act relating to cystic fibrosis treatment;
3 creating s. 627.6614, F.S.; requiring a group
4 health insurance policy to cover services
5 needed to treat cystic fibrosis authorized by a
6 physician; amending s. 641.31, F.S.; requiring
7 a contract by a health maintenance organization
8 to cover services needed to treat cystic
9 fibrosis as authorized by a physician; amending
10 s. 627.6515, F.S., relating to out-of-state
11 groups; conforming a cross-reference to changes
12 made by the act; providing that the act
13 fulfills an important state interest; providing
14 an effective date.

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16 WHEREAS, cystic fibrosis is a genetic disease that
17 adversely affects the respiratory system and the digestive
18 system, and

19 WHEREAS, only half of those suffering with cystic
20 fibrosis live to the age of 32, and

21 WHEREAS, the treatments for individuals with cystic
22 fibrosis include ingesting pancreatic enzymes or a wide
23 assortment of nutritional supplements, frequent postural
24 draining to clear the respiratory system, or using a feeding
25 tube to provide sustenance, and

26 WHEREAS, insurance companies oftentimes do not fully
27 cover the costs associated with treating cystic fibrosis, a
28 fatal disease, NOW, THEREFORE,

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

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1 Section 1. Section 627.6614, Florida Statutes, is
2 created to read:

3 627.6614 Cystic fibrosis treatment services.--A group
4 health insurance policy issued in this state must provide
5 coverage for all medically necessary chest physiotherapy
6 provided by a respiratory therapist licensed under part V of
7 chapter 468, home health care, equipment, supplies, and
8 enteral formulas described in s. 627.42395 which are used to
9 treat cystic fibrosis if the patient's treating physician or a
10 physician authorized by the insurer who specializes in the
11 treatment of cystic fibrosis certifies that such services are
12 medically necessary. The insurer may require the policyholder
13 to be responsible for any deductible or copayment that
14 generally applies under the policy.

15 Section 2. Present subsections (36), (37), (38), (39),
16 and (40) of section 641.31, Florida Statutes, are redesignated
17 as subsections (37), (38), (39), (40), and (41), respectively,
18 and a new subsection (36) is added to that section, to read:

19 641.31 Health maintenance contracts.--

20 (36) A group health maintenance contract issued in
21 this state must provide coverage for all medically necessary
22 chest physiotherapy provided by a respiratory therapist
23 licensed under part V of chapter 468, home health care,
24 equipment, supplies, and enteral formulas described in s.
25 627.42395 which are used to treat cystic fibrosis if the
26 patient's treating physician or a physician authorized by the
27 health maintenance organization who specializes in the
28 treatment of cystic fibrosis certifies that such services are
29 medically necessary. The health maintenance organization may
30 require the subscriber to be responsible for any deductible or
31 copayment that generally applies under the contract.

1 Section 3. Subsection (2) of section 627.6515, Florida
2 Statutes, is amended to read:

3 627.6515 Out-of-state groups.--

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

8 (a) The policy is issued to an employee group the
9 composition of which is substantially as described in s.
10 627.653; a labor union group or association group the
11 composition of which is substantially as described in s.
12 627.654; an additional group the composition of which is
13 substantially as described in s. 627.656; a group insured
14 under a blanket health policy when the composition of the
15 group is substantially in compliance with s. 627.659; a group
16 insured under a franchise health policy when the composition
17 of the group is substantially in compliance with s. 627.663;
18 an association group to cover persons associated in any other
19 common group, which common group is formed primarily for
20 purposes other than providing insurance; a group that is
21 established primarily for the purpose of providing group
22 insurance, provided the benefits are reasonable in relation to
23 the premiums charged thereunder and the issuance of the group
24 policy has resulted, or will result, in economies of
25 administration; or a group of insurance agents of an insurer,
26 which insurer is the policyholder;

27 (b) Certificates evidencing coverage under the policy
28 are issued to residents of this state and contain in
29 contrasting color and not less than 10-point type the
30 following statement: "The benefits of the policy providing
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1 your coverage are governed primarily by the law of a state
2 other than Florida"; and

3 (c) The policy provides the benefits specified in ss.
4 627.419, 627.6574, 627.6575, 627.6579, 627.6612, 627.66121,
5 627.66122, 627.6613, 627.6614, 627.667, 627.6675, 627.6691,
6 and 627.66911.

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

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12 "This policy is primarily governed by the laws
13 of ...insert state where the master policy is
14 filed.... As a result, all of the rating laws
15 applicable to policies filed in this state do
16 not apply to this coverage, which may result in
17 increases in your premium at renewal that would
18 not be permissible under a Florida-approved
19 policy. Any purchase of individual health
20 insurance should be considered carefully, as
21 future medical conditions may make it
22 impossible to qualify for another individual
23 health policy. For information concerning
24 individual health coverage under a
25 Florida-approved policy, consult your agent or
26 the Florida Department of Financial Services."
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28 This paragraph applies only to group certificates providing
29 health insurance coverage which require individualized
30 underwriting to determine coverage eligibility for an
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1 individual or premium rates to be charged to an individual
2 except for the following:

3 1. Policies issued to provide coverage to groups of
4 persons all of whom are in the same or functionally related
5 licensed professions, and providing coverage only to such
6 licensed professionals, their employees, or their dependents;

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

10 3. Policies issued to a bona fide association, as
11 defined by s. 627.6571(5), provided that there is a person or
12 board acting as a fiduciary for the benefit of the members,
13 and such association is not owned, controlled by, or otherwise
14 associated with the insurance company; or

15 4. Any accidental death, accidental death and
16 dismemberment, accident-only, vision-only, dental-only,
17 hospital indemnity-only, hospital accident-only, cancer,
18 specified disease, Medicare supplement, products that
19 supplement Medicare, long-term care, or disability income
20 insurance, or similar supplemental plans provided under a
21 separate policy, certificate, or contract of insurance, which
22 cannot duplicate coverage under an underlying health plan,
23 coinsurance, or deductibles or coverage issued as a supplement
24 to workers' compensation or similar insurance, or automobile
25 medical-payment insurance.

26 Section 4. The Legislature finds that this act
27 fulfills an important state interest.

28 Section 5. This act shall take effect January 1, 2008,
29 and applies to policies and contracts issued or renewed on or
30 after that date.

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