

By the Committee on Health Regulation; and Senators Saunders and Atwater

588-2155-07

1 A bill to be entitled
2 An act relating to health maintenance
3 contracts; amending s. 641.31, F.S.; requiring
4 a health maintenance organization to provide in
5 writing a disclosure of rights to new
6 subscribers who reside at a continuing care
7 facility or retirement facility; providing that
8 if a subscriber's request to be referred to the
9 skilled nursing unit or assisted living
10 facility that is part of the subscriber's place
11 of residence is not honored, the subscriber may
12 use a specified grievance process; providing an
13 effective date.

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

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17 Section 1. Subsection (25) of section 641.31, Florida
18 Statutes, is amended to read:

19 641.31 Health maintenance contracts.--

20 (25) If a subscriber is a resident of a continuing
21 care facility certified under chapter 651 or a retirement
22 facility consisting of a nursing home or assisted living
23 facility and residential apartments, the subscriber's primary
24 care physician must refer the subscriber to that facility's
25 skilled nursing unit or assisted living facility if requested
26 by the subscriber and agreed to by the facility; if the
27 primary care physician finds that such care is medically
28 necessary ~~it is in the best interest of the patient to do so;~~
29 if the facility agrees to be reimbursed at the health
30 maintenance organization's contract rate negotiated with
31 similar providers for the same services and supplies; and if

1 | the facility meets all guidelines established by the health
2 | maintenance organization related to quality of care,
3 | utilization, referral authorization, risk assumption, use of
4 | the health maintenance organization's network, and other
5 | criteria applicable to providers under contract for the same
6 | services and supplies. If a health maintenance organization
7 | enrolls a new subscriber who already resides in a continuing
8 | care facility or a retirement facility as described in this
9 | subsection, the health maintenance organization must provide
10 | in writing a disclosure of the subscriber's rights under this
11 | subsection. If a subscriber's request to be referred to the
12 | skilled nursing unit or assisted living facility that is part
13 | of the subscriber's place of residence is not honored, the
14 | subscriber may use the grievance process provided in s.
15 | 641.511.

16 | Section 2. This act shall take effect July 1, 2007.

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18 | STATEMENT OF SUBSTANTIAL CHANGES CONTAINED IN
19 | COMMITTEE SUBSTITUTE FOR
20 | Senate Bill 590

21 | The committee substitute clarifies that the HMO primary care
22 | physician must make a determination that the referral for
23 | nursing care or assisted living care is medically necessary.
24 | Once this determination is made, the insured subscriber has
25 | the right to have that care provided at his or her own
26 | continuing care facility or retirement facility.