

HB 535

2008

1                   A bill to be entitled  
2           An act relating to health insurance; amending s. 627.4236,  
3           F.S.; revising the definition of the term "bone marrow  
4           transplant"; amending ss. 627.642, 627.657, and 641.31,  
5           F.S.; requiring an identification card containing  
6           specified information to be given to insureds under health  
7           benefit plans and group health insurance policies and  
8           persons having health care services through health  
9           maintenance contracts; providing applicability; providing  
10          an effective date.

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

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14          Section 1. Subsection (1) of section 627.4236, Florida  
15          Statutes, is amended to read:

16          627.4236 Coverage for bone marrow transplant procedures.--

17          (1) As used in this section, the term "bone marrow  
18          transplant" means human blood precursor cells administered to a  
19          patient to restore normal hematological and immunological  
20          functions following ablative or nonablative therapy with  
21          curative or life-prolonging intent. Human blood precursor cells  
22          may be obtained from the patient in an autologous transplant or  
23          from a medically acceptable related or unrelated donor, and may  
24          be derived from bone marrow, circulating blood, or a combination  
25          of bone marrow and circulating blood. If chemotherapy is an  
26          integral part of the treatment involving bone marrow  
27          transplantation, the term "bone marrow transplant" includes both  
28          the transplantation and the chemotherapy.

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CODING: Words ~~stricken~~ are deletions; words underlined are additions.

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29 Section 2. Subsection (3) is added to section 627.642,  
 30 Florida Statutes, to read:

31 627.642 Outline of coverage.--

32 (3) In addition to the outline of coverage, a policy as  
 33 specified in s. 627.6699(3)(k) must be accompanied by an  
 34 identification card that contains, at a minimum:

35 (a) The name of the organization issuing the policy or the  
 36 name of the organization administering the policy, whichever  
 37 applies.

38 (b) The name of the contract holder.

39 (c) The type of plan only if the plan is filed in the  
 40 state, an indication that the plan is self-funded, or the name  
 41 of the network.

42 (d) The member identification number, contract number, and  
 43 policy or group number, if applicable.

44 (e) A contact phone number or electronic address for  
 45 authorizations and admission certifications.

46 (f) A phone number or electronic address whereby the  
 47 covered person or hospital, physician, or other person rendering  
 48 services covered by the policy may obtain benefits verification  
 49 and information in order to estimate patient financial  
 50 responsibility, in compliance with privacy rules under the  
 51 Health Insurance Portability and Accountability Act.

52 (g) The national plan identifier, in accordance with the  
 53 compliance date set forth by the federal Department of Health  
 54 and Human Services.

55

56 The identification card must present the information in a  
57 readily identifiable manner or, alternatively, the information  
58 may be embedded on the card and available through magnetic  
59 stripe or smart card. The information may also be provided  
60 through other electronic technology.

61 Section 3. Present subsection (2) of section 627.657,  
62 Florida Statutes, is renumbered as subsection (3), and a new  
63 subsection (2) is added to that section to read:

64 627.657 Provisions of group health insurance policies.--

65 (2) The medical policy as specified in s. 627.6699(3)(k)  
66 must be accompanied by an identification card that contains, at  
67 a minimum:

68 (a) The name of the organization issuing the policy or  
69 name of the organization administering the policy, whichever  
70 applies.

71 (b) The name of the certificateholder.

72 (c) The type of plan only if the plan is filed in the  
73 state, an indication that the plan is self-funded, or the name  
74 of the network.

75 (d) The member identification number, contract number, and  
76 policy or group number, if applicable.

77 (e) A contact phone number or electronic address for  
78 authorizations and admission certifications.

79 (f) A phone number or electronic address whereby the  
80 covered person or hospital, physician, or other person rendering  
81 services covered by the policy may obtain benefits verification  
82 and information in order to estimate patient financial  
83 responsibility, in compliance with privacy rules under the

84 Health Insurance Portability and Accountability Act.

85 (g) The national plan identifier, in accordance with the  
 86 compliance date set forth by the federal Department of Health  
 87 and Human Services.

88  
 89 The identification card must present the information in a  
 90 readily identifiable manner or, alternatively, the information  
 91 may be embedded on the card and available through magnetic  
 92 stripe or smart card. The information may also be provided  
 93 through other electronic technology.

94 Section 4. Subsection (41) is added to section 641.31,  
 95 Florida Statutes, to read:

96 641.31 Health maintenance contracts.--

97 (41) The contract, certificate, or member handbook must be  
 98 accompanied by an identification card that contains, at a  
 99 minimum:

100 (a) The name of the organization offering the contract or  
 101 name of the organization administering the contract, whichever  
 102 applies.

103 (b) The name of the subscriber.

104 (c) A statement that the health plan is a health  
 105 maintenance organization. Only a health plan with a certificate  
 106 of authority issued under this chapter may be identified as a  
 107 health maintenance organization.

108 (d) The member identification number, contract number, and  
 109 group number, if applicable.

110 (e) A contact phone number or electronic address for  
 111 authorizations and admission certifications.

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112        (f) A phone number or electronic address whereby the  
113 covered person or hospital, physician, or other person rendering  
114 services covered by the contract may obtain benefits  
115 verification and information in order to estimate patient  
116 financial responsibility, in compliance with privacy rules under  
117 the Health Insurance Portability and Accountability Act.

118        (g) The national plan identifier, in accordance with the  
119 compliance date set forth by the federal Department of Health  
120 and Human Services.

121  
122 The identification card must present the information in a  
123 readily identifiable manner or, alternatively, the information  
124 may be embedded on the card and available through magnetic  
125 stripe or smart card. The information may also be provided  
126 through other electronic technology.

127        Section 5. This act shall take effect January 1, 2009, and  
128 shall apply to identification cards issued for policies or  
129 certificates issued or renewed on or after that date.