

Amendment No.

CHAMBER ACTION

Senate

House

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1 Representative Patronis offered the following:

2
3 **Amendment (with title amendment)**

4 Between lines 4184-4185 and insert:

5 Section 74. Paragraph (c) of subsection (1) of section
6 627.602, Florida Statutes, is amended to read:

7 627.602 Scope, format of policy.--

8 (1) Each health insurance policy delivered or issued for
9 delivery to any person in this state must comply with all
10 applicable provisions of this code and all of the following
11 requirements:

12 (c) The policy may purport to insure only one person,
13 except that upon the application of an adult member of a family,
14 who is deemed to be the policyholder, a policy may insure,
15 either originally or by subsequent amendment, any eligible
16 members of that family, including husband, wife, any children or
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17 any person dependent upon the policyholder. ~~If an insurer offers~~
18 ~~coverage for dependent children of the policyholder, such policy~~
19 ~~must comply with the provisions of s. 627.6562.~~

20 Section 75. Section 627.6562, Florida Statutes, is
21 amended to read:

22 627.6562 Dependent coverage.--

23 (1) If an insurer offers coverage ~~under a group, blanket,~~
24 ~~or franchise health insurance policy~~ that insures dependent
25 children of the policyholder or certificateholder, the policy
26 must insure a dependent child of the policyholder or
27 certificateholder at least until the end of the calendar year in
28 which the child reaches the age of 25, if the child meets all of
29 the following:

30 (a) The child is dependent upon the policyholder or
31 certificateholder for support.

32 (b) The child is living in the household of the
33 policyholder or certificateholder, or the child is a full-time
34 or part-time student.

35 (2) At the option of the group policyholder, all
36 certificateholders within a group policy shall be offered A
37 ~~policy that is subject to the requirements of subsection (1)~~
38 ~~must also offer the policyholder or certificateholder~~ the option
39 to insure a child of the ~~policyholder or~~ certificateholder at
40 least until the end of the calendar year in which the child
41 reaches the age of 30, if the child:

42 (a) Is unmarried and does not have a dependent of his or
43 her own;

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44 (b) Is a resident of this state or a full-time or part-
45 time student; and

46 (c) Is not eligible for provided coverage as a named
47 subscriber, insured, enrollee, or covered person under any other
48 group, blanket, or franchise health insurance policy, health
49 maintenance organization contract, or individual health benefits
50 plan, including, but not limited to, coverage offered pursuant
51 to the Consolidated Omnibus Budget Reconciliation Act of 1985 or
52 s. 627.6692, or is not entitled to benefits under Title XVIII of
53 the Social Security Act.

54 (d) The terms of the policy may include a provision that
55 the child's eligibility for coverage ceases when he or she is no
56 longer eligible as provided in this subsection. In such case,
57 coverage shall continue through the end of the calendar month in
58 which the child loses eligibility. If loss of eligibility occurs
59 because of the birth of a child, the newborn child is not
60 eligible for coverage under s. 627.6575 or s. 641.31(9).

61 (3) If, pursuant to subsection (2), a child is provided
62 coverage under the parent's policy after the end of the calendar
63 year in which the child reaches age 25 and coverage for the
64 child is subsequently terminated, the child is not eligible to
65 be covered under the parent's policy unless the child was
66 continuously covered by other creditable coverage without a gap
67 in coverage of more than 63 days. For the purposes of this
68 subsection, the term "creditable coverage" has the same meaning
69 as provided in s. 627.6561(5).

70 (4) This section does not:

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71 (a) Affect or preempt an insurer's right to medically
72 underwrite or charge the appropriate premium and carriers,
73 including small employer carriers as defined in s.
74 627.6699(3)(w), and are expressly authorized to charge
75 actuarially sound, distinct rates that are separate from the
76 rates for dependent coverage for coverage of children of
77 certificateholders covered pursuant to subsection (2);

78 (b) Require coverage for services provided to a dependent
79 before October 1, 2008;

80 (c) Require an employer to pay all or part of the cost of
81 coverage provided for a dependent under this section; or

82 (d) Prohibit an insurer or health maintenance organization
83 from increasing the limiting age for dependent coverage to age
84 30 in policies or contracts issued or renewed prior to the
85 effective date of this act.

86 (5)(a) Until April 1, 2009, the parent of a child who
87 qualifies for coverage under subsection (2) but whose coverage
88 as a dependent child under the parent's plan terminated under
89 the terms of the plan before October 1, 2008, may make a written
90 election to reinstate coverage, without proof of insurability,
91 under that plan as a dependent child pursuant to this section.

92 (b) The covered person's plan may require the payment of a
93 premium by the covered person or dependent child, as
94 appropriate, subject to the approval of the Office of Insurance
95 Regulation, for any period of coverage relating to a dependent's
96 written election for coverage pursuant to paragraph (a).

97 (c) Notice regarding the reinstatement of coverage for a
98 dependent child as provided under this subsection must be

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99 provided to a covered person in the certificate of coverage
100 prepared for covered persons by the insurer or by the covered
101 person's employer. Such notice may be given through the group
102 policyholder.

103 (6) This section applies only to group major medical
104 policies and does not apply to conversion policies, policies
105 offered pursuant to the Consolidated Omnibus Budget
106 Reconciliation Act of 1985 or s. 627.6692, individual policies,
107 out-of-state group policies written pursuant to s. 627.6515, or
108 limited benefit or supplemental policies, including, but not
109 limited to, accident only, specified disease, disability income,
110 Medicare supplement, ~~or~~ long-term care insurance, or other
111 supplemental or limited benefit policies.

112 (7) The commission may adopt rules pursuant to ss.
113 120.536(1) and 120.54 to administer this section.

114 Section 76. Subsection (41) of section 641.31, Florida
115 Statutes, is amended to read:

116 641.31 Health maintenance contracts.--

117 (41) All group health maintenance contracts providing
118 coverage for a member of the subscriber's family must comply
119 with the provisions of s. 627.6562.

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

124 Remove line 328 and insert:
125 agency to develop rules; amending s. 627.602, F.S.; deleting a
126 requirement that certain policies providing coverage for
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HOUSE AMENDMENT

Bill No. CS/CS/CS/SB 1986

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127 dependent children comply with certain provisions; amending s.
128 627.6562, F.S.; revising dependent coverage requirements;
129 specifying limited application to group major medical policies;
130 authorizing the Financial Services Commission to adopt rules;
131 amending s. 641.31, F.S.; specifying required application of
132 certain provisions to certain group health maintenance
133 contracts; providing an effective date.

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