

By the Committee on Banking and Insurance; and Senator Gaetz

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1 A bill to be entitled
2 An act relating to access to health care; amending s.
3 624.91, F.S.; expanding the membership of the board of
4 directors of the Florida Healthy Kids Corporation;
5 amending s. 636.035, F.S.; specifying certain provider
6 arrangement contract prohibitions or restrictions;
7 prohibiting prepaid limited health service
8 organizations from specifying certain contract
9 continuation or renewal conditions; providing for
10 voiding of certain contracts; specifying absence of
11 liability for certain criminal penalties; amending s.
12 641.315, F.S.; providing for application to health
13 maintenance organizations of the prohibition against
14 specifying certain contract continuation or renewal
15 conditions; amending s. 766.1116, F.S.; revising time
16 requirements for a health care practitioner's waiver
17 of license renewal fees and continuing education
18 requirements; providing an effective date.

19
20 Be It Enacted by the Legislature of the State of Florida:

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22 Section 1. Paragraph (a) of subsection (6) of section
23 624.91, Florida Statutes, is amended to read:

24 624.91 The Florida Healthy Kids Corporation Act.—

25 (6) BOARD OF DIRECTORS.—

26 (a) The Florida Healthy Kids Corporation shall operate
27 subject to the supervision and approval of a board of directors
28 chaired by the Chief Financial Officer or her or his designee,
29 and composed of 11 ~~10~~ other members selected for 3-year terms of

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30 office as follows:

31 1. The Secretary of Health Care Administration, or his or
32 her designee.~~†~~

33 2. One member appointed by the Commissioner of Education
34 from the Office of School Health Programs of the Florida
35 Department of Education.~~†~~

36 3. One member appointed by the Chief Financial Officer from
37 among three members nominated by the Florida Pediatric Society.~~†~~

38 4. One member, appointed by the Governor, who represents
39 the Children's Medical Services Program.~~†~~

40 5. One member appointed by the Chief Financial Officer from
41 among three members nominated by the Florida Hospital
42 Association.~~†~~

43 6. One member, appointed by the Governor, who is an expert
44 on child health policy.~~†~~

45 7. One member, appointed by the Chief Financial Officer,
46 from among three members nominated by the Florida Academy of
47 Family Physicians.~~†~~

48 8. One member, appointed by the Governor, who represents
49 the state Medicaid program.~~†~~

50 9. One member, appointed by the Chief Financial Officer,
51 from among three members nominated by the Florida Association of
52 Counties.~~†~~~~and~~

53 10. The State Health Officer or her or his designee.

54 11. One member, appointed by the Governor, from among three
55 members nominated by the Florida Dental Association.

56 Section 2. Subsections (11) and (12) are added to section
57 636.035, Florida Statutes, to read:

58 636.035 Provider arrangements.—

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59 (11) A contract between a prepaid limited health service
60 organization and a provider of limited health services may not
61 contain any provision that in any way prohibits or restricts the
62 limited health service provider from entering into or renewing a
63 contract with any other prepaid limited health service
64 organization. This subsection applies to all contracts entered
65 into or renewed on or after July 1, 2009.

66 (12) A prepaid limited health service organization may not
67 require, as a condition of continuation or renewal of a
68 contract, a contracted limited health service provider to accept
69 the terms of other health care practitioner contracts with the
70 prepaid limited health service organization or any insurer or
71 other limited health service organization under common
72 management and control with the prepaid limited health service
73 organization, including, but not limited to, Medicare and
74 Medicaid practitioner contracts and those authorized by s.
75 627.6471, s. 627.6472, s. 641.315, or this section, except for a
76 practitioner in a group practice as defined in s. 456.053 who
77 must accept the terms of a contract negotiated for the
78 practitioner by the group. Any contract provision that violates
79 this subsection is void. A violation of this subsection is not
80 subject to the criminal penalty specified in s. 624.15. This
81 subsection applies to all contracts entered into or renewed on
82 or after July 1, 2009.

83 Section 3. Subsection (10) of section 641.315, Florida
84 Statutes, is amended to read:

85 641.315 Provider contracts.—

86 (10) A health maintenance organization shall not require a
87 contracted health care practitioner as defined in s. 456.001(4)

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88 to accept the terms of other health care practitioner contracts
89 with the health maintenance organization or any insurer, or
90 other health maintenance organization, under common management
91 and control with the health maintenance organization, including
92 Medicare and Medicaid practitioner contracts and those
93 authorized by s. 627.6471, s. 627.6472, s. 636.035, or this
94 section ~~s. 641.315~~, except for a practitioner in a group
95 practice as defined in s. 456.053 who must accept the terms of a
96 contract negotiated for the practitioner by the group, as a
97 condition of continuation or renewal of the contract. Any
98 contract provision that violates this section is void. A
99 violation of this section is not subject to the criminal penalty
100 specified in s. 624.15.

101 Section 4. Subsection (2) of section 766.1116, Florida
102 Statutes, is amended to read:

103 766.1116 Health care practitioner; waiver of license
104 renewal fees and continuing education requirements.—

105 (2) Notwithstanding any provision of chapter 458, chapter
106 459, chapter 460, chapter 461, part I of chapter 464, chapter
107 466, or chapter 467 to the contrary, any health care
108 practitioner who participates as a health care provider under s.
109 766.1115 and thereby agrees with a governmental contractor to
110 provide his or her services without compensation and as an agent
111 of the governmental contractor to low-income recipients in
112 accordance with s. 766.1115 for at least 160 ~~80~~ hours ~~a year~~ for
113 each ~~year during the~~ biennial licensure period, or, if the
114 health care practitioner is retired, for at least 800 ~~400~~ hours
115 ~~a year for each year~~ during the licensure period, upon providing
116 sufficient proof from the applicable governmental contractor

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117 that the health care practitioner has completed the hours at the
118 time of license renewal under procedures specified by the
119 Department of Health, shall be eligible for:

120 (a) Waiver of the biennial license renewal fee for an
121 active license; and

122 (b) Fulfillment of a maximum of 25 percent of the
123 continuing education hours required for license renewal under s.
124 456.013(9).

125 Section 5. This act shall take effect July 1, 2009.