



170500

LEGISLATIVE ACTION

Senate	.	House
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	.	
Floor: 1/R/2R	.	Floor: SA1/RC
05/04/2011 05:45 PM	.	05/03/2011 05:32 PM
	.	

Senator Garcia moved the following:

Senate Amendment

Delete lines 189 - 284

and insert:

A vendor described in subparagraphs 4.-7. ~~3.-6.~~ may not sell products that provide risk-bearing coverage unless that vendor is authorized under a certificate of authority issued by the Office of Insurance Regulation and is authorized to provide coverage in the relevant geographic area ~~under the provisions of the Florida Insurance Code~~. Otherwise eligible vendors may be excluded from participating in the program for deceptive or predatory practices, financial insolvency, or failure to comply with the terms of the participation agreement or other standards



170500

14 set by the corporation.

15 (e) Any risk-bearing product available under subparagraphs
16 (d)1.-4. must be approved by the Office of Insurance Regulation.
17 Any non-risk-bearing product must be approved by the
18 corporation.

19 (f)~~(e)~~ Eligible individuals may voluntarily continue
20 participation in the program regardless of subsequent changes in
21 job status or Medicaid eligibility. Individuals who join the
22 program may participate by complying with the procedures
23 established by the corporation. These procedures must include,
24 but are not limited to:

- 25 1. Submission of required information.
- 26 2. Authorization for payroll deduction.
- 27 3. Compliance with federal tax requirements.
- 28 4. Arrangements for payment in the event of job changes.
- 29 5. Selection of products and services.

30 (g)~~(f)~~ Vendors who choose to participate in the program may
31 enroll by complying with the procedures established by the
32 corporation. These procedures may ~~must~~ include, but are not
33 limited to:

34 1. Submission of required information, including a complete
35 description of the coverage, services, provider network, payment
36 restrictions, and other requirements of each product offered
37 through the program.

38 2. Execution of an agreement that ~~to make~~ all risk-bearing
39 products offered through the program are in compliance with the
40 insurance code and are ~~guaranteed-issue policies,~~ subject to
41 preexisting condition exclusions established by the corporation.

42 3. Execution of an agreement that prohibits refusal to sell



170500

43 any offered non-risk-bearing product to a participant who elects
44 to buy it.

45 4. Establishment of product prices based on age, gender,
46 family composition, and location of the individual participant,
47 which may include medical underwriting.

48 5. Arrangements for receiving payment for enrolled
49 participants.

50 6. Participation in ongoing reporting processes established
51 by the corporation.

52 7. Compliance with grievance procedures established by the
53 corporation.

54 (h) ~~(g)~~ Health insurance agents licensed under part IV of
55 chapter 626 are eligible to voluntarily participate as buyers'
56 representatives. A buyer's representative acts on behalf of an
57 individual purchasing health insurance and health services
58 through the program by providing information about products and
59 services available through the program and assisting the
60 individual with both the decision and the procedure of selecting
61 specific products. Serving as a buyer's representative does not
62 constitute a conflict of interest with continuing
63 responsibilities as a health insurance agent if the relationship
64 between each agent and any participating vendor is disclosed
65 before advising an individual participant about the products and
66 services available through the program. In order to participate,
67 a health insurance agent shall comply with the procedures
68 established by the corporation, including:

69 1. Completion of training requirements.

70 2. Execution of a participation agreement specifying the
71 terms and conditions of participation.



170500

72 3. Disclosure of any appointments to solicit insurance or
73 procure applications for vendors participating in the program.

74 4. Arrangements to receive payment from the corporation for
75 services as a buyer's representative.

76 (5) PRODUCTS.—

77 (a) The products that may be made available for purchase
78 through the program include, but are not limited to:

79 1. Health insurance policies.

80 2. Health maintenance contracts.

81 ~~3.2.~~ Limited benefit plans.

82 ~~4.3.~~ Prepaid clinic services.

83 ~~5.4.~~ Service contracts.

84 ~~6.5.~~ Arrangements for purchase of specific amounts and
85 types of health services and treatments.

86 ~~7.6.~~ Flexible spending accounts.

87 (b) Health insurance policies, health maintenance
88 contracts, limited benefit plans, prepaid service contracts, and
89 other contracts for services must ensure the availability of
90 covered services ~~and benefits to participating individuals for~~
91 ~~at least 1 full enrollment year.~~

92 (c) Products may be offered for multiyear periods provided
93 the price of the product is specified for the entire period or
94 for each separately priced segment of the policy or contract.

95 (d) The corporation shall provide a disclosure form for
96 consumers to acknowledge their understanding of the nature of,
97 and any limitations to, the benefits provided by the products
98 and services being purchased by the consumer.

99 (e) The corporation must determine that making the plan
100 available through the program is in the interest of eligible



170500

101 individuals and eligible employers in the state.

102 (6) PRICING.—Prices for the products and services sold
103 through the program must be transparent to participants and
104 established by the vendors. Risk-bearing product approved by the
105 Office of Insurance Regulation must be priced pursuant to state
106 law governing the rates of any insurance product. ~~based on age,~~
107 ~~gender, and location~~