

By Senator Hays

20-00518-11

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1                                   A bill to be entitled  
 2       An act relating to dentists; amending s. 627.6474,  
 3       F.S.; prohibiting contracts between health insurers  
 4       and dentists from containing certain fee requirements  
 5       set by the insurer under certain circumstances;  
 6       providing a definition; amending s. 636.035, F.S.;  
 7       prohibiting contracts between prepaid limited health  
 8       service organizations and dentists from containing  
 9       certain fee requirements set by the organization under  
 10      certain circumstances; providing a definition;  
 11      amending s. 641.315, F.S.; prohibiting contracts  
 12      between health maintenance organizations and dentists  
 13      from containing certain fee requirements set by the  
 14      organization under certain circumstances; providing a  
 15      definition; providing for application of the act;  
 16      providing an effective date.

17  
 18 Be It Enacted by the Legislature of the State of Florida:

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 20       Section 1. Section 627.6474, Florida Statutes, is amended  
 21 to read:

22       627.6474 Provider contracts.—

23       (1) A health insurer may ~~shall~~ not require a contracted  
 24 health care practitioner as defined in s. 456.001(4) to accept  
 25 the terms of other health care practitioner contracts with the  
 26 insurer or any other insurer, or health maintenance  
 27 organization, under common management and control with the  
 28 insurer, including Medicare and Medicaid practitioner contracts  
 29 and those authorized by s. 627.6471, s. 627.6472, s. 636.035, or

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30 s. 641.315, except for a practitioner in a group practice as  
31 defined in s. 456.053 who must accept the terms of a contract  
32 negotiated for the practitioner by the group, as a condition of  
33 continuation or renewal of the contract. Any contract provision  
34 that violates this section is void. A violation of this section  
35 is not subject to the criminal penalty specified in s. 624.15.

36 (2) A contract between a health insurer and a dentist  
37 licensed under chapter 466 for the provision of services to  
38 patients may not contain any provision that requires the dentist  
39 to provide services to the insured under such contract at a fee  
40 set by the health insurer unless such services are covered  
41 services under the applicable contract. As used in this  
42 subsection, the term "covered services" means services  
43 reimbursable under the applicable contract, subject to such  
44 contractual limitations on benefits, such as deductibles,  
45 coinsurance, and copayments, as may apply. However, covered  
46 services do not include dental services that are provided by a  
47 dentist to an insured who has already met or exceeded the annual  
48 or other periodic payment maximum established by the contract or  
49 dental services that are not listed as a benefit that the  
50 insured is entitled to receive under the contract.

51 Section 2. Subsection (13) is added to section 636.035,  
52 Florida Statutes, to read:

53 636.035 Provider arrangements.—

54 (13) A contract between a prepaid limited health service  
55 organization and a dentist licensed under chapter 466 for the  
56 provision of services to subscribers of the prepaid limited  
57 health service organization may not contain any provision that  
58 requires the dentist to provide services to subscribers of the

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59 prepaid limited health service organization at a fee set by the  
60 prepaid limited health service organization unless such services  
61 are covered services under the applicable contract. As used in  
62 this subsection, the term "covered services" means services  
63 reimbursable under the applicable contract, subject to such  
64 contractual limitations on benefits, such as deductibles,  
65 coinsurance, and copayments, as may apply. However, covered  
66 services do not include dental services that are provided by a  
67 dentist to a subscriber who already has met or exceeded the  
68 annual or other periodic payment maximum established by the  
69 contract or dental services that are not listed as a benefit  
70 that the subscriber is entitled to receive under the contract.

71 Section 3. Subsection (11) is added to section 641.315,  
72 Florida Statutes, to read:

73 641.315 Provider contracts.—

74 (11) A contract between a health maintenance organization  
75 and a dentist licensed under chapter 466 for the provision of  
76 services to subscribers of the health maintenance organization  
77 may not contain any provision that requires the dentist to  
78 provide services to subscribers of the health maintenance  
79 organization at a fee set by the health maintenance organization  
80 unless such services are covered services under the applicable  
81 contract. As used in this subsection, the term "covered  
82 services" means services reimbursable under the applicable  
83 contract, subject to such contractual limitations on subscriber  
84 benefits, such as deductibles, coinsurance, and copayments, as  
85 may apply. However, covered services do not include any dental  
86 services provided by a dentist to a subscriber who already has  
87 met or exceeded the annual or other periodic payment maximum

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88 established by the contract or dental services that are not  
89 listed as a benefit that the subscriber is entitled to receive  
90 under the contract.

91 Section 4. This act shall take effect July 1, 2011, and  
92 applies to contracts entered into or renewed on or after that  
93 date.