

By Senator Bogdanoff

25-00536B-12

20121418

1 A bill to be entitled
2 An act relating to health insurance providers;
3 amending s. 627.6471, F.S.; requiring an insurer to
4 provide 6 months' notice to a policyholder if a
5 preferred provider is terminated from a preferred
6 provider network; providing exceptions; amending s.
7 641.31, F.S.; requiring a health maintenance
8 organization to provide 6 months' notice to a
9 subscriber if a network provider is terminated from a
10 provider network; providing exceptions; providing an
11 effective date.

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

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15 Section 1. Subsection (7) is added to section 627.6471,
16 Florida Statutes, to read:

17 627.6471 Contracts for reduced rates of payment;
18 limitations; coinsurance and deductibles.—

19 (7) An insurer must provide a policyholder or
20 certificateholder with 6 months' written notice before requiring
21 a policyholder to discontinue services with a preferred provider
22 whose contract has not been renewed or who has been terminated
23 from the preferred provider network and to select a new
24 preferred provider from the insurer's list. This requirement
25 does not apply to a preferred provider providing oncology or
26 psychotherapeutic services until such services have been
27 concluded. The insurer shall make payments to the provider in
28 accordance with the terms of the preferred provider contract in
29 effect at the time the provider was not renewed or terminated

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30 for the duration of the 6 months' notice period or, in the case
31 of oncology or psychotherapeutic services, until such services
32 are concluded.

33 Section 2. Subsection (44) is added to section 641.31,
34 Florida Statutes, to read:

35 641.31 Health maintenance contracts.—

36 (44) The health maintenance organization must provide a
37 subscriber with 6 months' written notice before requiring a
38 subscriber to discontinue services with a network provider whose
39 contract has not been renewed or who has been terminated from
40 the network and to select a new network provider. This
41 requirement does not apply to a network provider providing
42 oncology or psychotherapeutic services until such services have
43 been concluded. The insurer shall make payments to the provider
44 in accordance with the terms of the provider contract in effect
45 at the time the provider was not renewed or terminated for the
46 duration of the 6 months' notice period or, in the case of
47 oncology or psychotherapeutic services, until such services are
48 concluded.

49 Section 3. This act shall take effect July 1, 2012.