

By Senator Ring

29-01292A-13

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1                   A bill to be entitled  
2           An act relating to health insurance coverage for  
3           prescription drugs; amending ss. 627.6487, 627.6699,  
4           and 641.31, F.S.; prohibiting higher copayments,  
5           deductibles, coinsurance, or similar charges for  
6           nonpreferred prescription drugs as compared to  
7           preferred prescription drugs; requiring the Agency for  
8           Health Care Administration, with the assistance of the  
9           Office of Insurance Regulation, to conduct a study and  
10          submit a report to the Governor and Legislature by a  
11          certain date; providing effective dates.

12  
13 Be It Enacted by the Legislature of the State of Florida:

14  
15           Section 1. Effective January 1, 2014, subsection (1) of  
16           section 627.6487, Florida Statutes, is amended to read:

17           627.6487 Guaranteed availability of individual health  
18           insurance coverage to eligible individuals.—

19           (1) Subject to the requirements of this section, each  
20           health insurance issuer that offers individual health insurance  
21           coverage in this state may not, with respect to an eligible  
22           individual who desires to enroll in individual health insurance  
23           coverage:

24           (a) Decline to offer such coverage to, or deny enrollment  
25           of, such individual; ~~or~~

26           (b) Impose any preexisting condition exclusion with respect  
27           to such coverage. For purposes of this section, the term  
28           “preexisting condition” means, with respect to coverage, a  
29           limitation of benefits relating to a condition based on the fact

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30 that the condition was present before the date of enrollment for  
31 such coverage, whether or not any medical advice, diagnosis,  
32 care, or treatment was recommended or received before such date;  
33 or

34 (c) Notwithstanding s. 624.215, impose copayments,  
35 deductibles, coinsurance, or similar charges on any nonpreferred  
36 prescription drug which exceed the dollar amount of cost-  
37 sharing, deductibles, coinsurance, or similar charges for  
38 preferred prescription drugs. This paragraph expires July 1,  
39 2015.

40 Section 2. Effective January 1, 2014, paragraph (f) is  
41 added to subsection (12) of section 627.6699, Florida Statutes,  
42 to read:

43 627.6699 Employee Health Care Access Act.—

44 (12) STANDARD, BASIC, HIGH DEDUCTIBLE, AND LIMITED HEALTH  
45 BENEFIT PLANS.—

46 (f) Notwithstanding s. 624.215, a standard health benefit  
47 plan or basic health benefit plan under this section may not  
48 impose copayments, deductibles, coinsurance, or similar charges  
49 on any nonpreferred prescription drug which exceed the dollar  
50 amount of copayments, deductibles, coinsurance, or similar  
51 charges for preferred prescription drugs. This paragraph expires  
52 December 31, 2015.

53 Section 3. Effective January 1, 2014, subsection (44) is  
54 added to section 641.31, Florida Statutes, to read:

55 641.31 Health maintenance contracts.—

56 (44) Notwithstanding s. 624.215, a health maintenance  
57 contract may not impose copayments, deductibles, coinsurance, or  
58 similar charges on any nonpreferred prescription drug which

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59 exceed the dollar amount of copayments, deductibles, or  
60 coinsurance, or percentage obligations for preferred  
61 prescription drugs. This subsection expires December 31, 2014.

62 Section 4. Notwithstanding s. 624.215, Florida Statutes,  
63 the Agency for Health Care Administration, with the assistance  
64 of the Office of Insurance Regulation, shall conduct a study of  
65 the effect of prohibiting higher copayments, deductibles,  
66 coinsurance, or similar charges for nonpreferred prescription  
67 drugs as compared to preferred prescription drugs as mandated by  
68 the amendments to ss. 627.6487, 627.6699, and 641.31, Florida  
69 Statutes, on health care access and patient care, as well as the  
70 fiscal impact to insurers and managed care organizations and  
71 policyholders and subscribers. The agency and office shall  
72 submit their report to the Governor, the President of the  
73 Senate, and the Speaker of the House of Representatives by March  
74 1, 2015. This section expires July 1, 2015.

75 Section 5. Except as otherwise expressly provided in this  
76 act, this act shall take effect July 1, 2013.