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LEGISLATIVE ACTION

Senate

House

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Floor: 7/AD/3R

05/01/2013 01:39 PM

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Senator Benacquisto moved the following:

**Senate Amendment (with title amendment)**

Between lines 2123 and 2124

insert:

Section 53. Sections 627.42391 and 641.313, Florida Statutes, may be cited as the "Cancer Treatment Fairness Act."

Section 54. Effective July 1, 2013, section 627.42391, Florida Statutes, is created to read:

627.42391 Cancer treatment parity; orally administered cancer treatment medications.-

(1) As used in this section, the term:

(a) "Cancer treatment medication" means medication prescribed by a treating physician who determines that the



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14 medication is medically necessary to kill or slow the growth of  
15 cancerous cells in a manner consistent with nationally accepted  
16 standards of practice.

17 (b) "Cost sharing" includes copayments, coinsurance, dollar  
18 limits, and deductibles imposed on the covered person.

19 (2) Beginning January 1, 2014, an individual or group  
20 insurance policy, including a policy issued to a small employer  
21 as defined in s. 627.6699, delivered, issued for delivery,  
22 renewed, amended, or continued in this state which provides  
23 medical, major medical, or similar comprehensive coverage and  
24 includes coverage for cancer treatment medications, must also  
25 cover prescribed, orally administered cancer treatment  
26 medications and may not apply cost-sharing requirements for  
27 prescribed, orally administered cancer treatment medications  
28 which are less favorable to the covered person than cost-sharing  
29 requirements for intravenous or injected cancer treatment  
30 medications covered under the policy.

31 (3) An insurer that provides a policy described in  
32 subsection (2), and any participating entity through which the  
33 insurer offers health services, may not:

34 (a) Vary the terms of a policy in effect on July 1, 2013,  
35 in order to avoid compliance with this section.

36 (b) Provide any incentive, including, but not limited to, a  
37 monetary incentive, or impose treatment limitations to encourage  
38 a covered person to accept less than the minimum protections  
39 available under this section.

40 (c) Penalize a health care practitioner or reduce or limit  
41 the compensation of a health care practitioner for recommending  
42 or providing services or care to a covered person as required



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43 under this section.

44 (d) Provide any incentive, including, but not limited to, a  
45 monetary incentive, to induce a health care practitioner to  
46 provide care or services that do not comply with this section.

47 (e) Change the classification of any intravenous or  
48 injected cancer treatment medication or increase the amount of  
49 cost sharing applicable to any intravenous or injected cancer  
50 treatment medication in effect on July 1, 2013, in order to  
51 comply with this section.

52 Section 55. Effective July 1, 2013, section 641.313,  
53 Florida Statutes, is created to read:

54 641.313 Cancer treatment parity; orally administered cancer  
55 treatment medications.-

56 (1) As used in this section, the term:

57 (a) "Cancer treatment medication" means medication  
58 prescribed by a treating physician who determines that the  
59 medication is medically necessary to kill or slow the growth of  
60 cancerous cells in a manner consistent with nationally accepted  
61 standards of practice.

62 (b) "Cost sharing" includes copayments, coinsurance, dollar  
63 limits, and deductibles imposed on the covered person.

64 (2) Beginning January 1, 2014, a health maintenance  
65 contract, including a contract issued to a small employer as  
66 defined in s. 627.6699, delivered, issued for delivery, renewed,  
67 amended, or continued in this state which provides medical,  
68 major medical, or similar comprehensive coverage and includes  
69 coverage for cancer treatment medications, must also cover  
70 prescribed, orally administered cancer treatment medications and  
71 may not apply cost-sharing requirements for prescribed, orally



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72 administered cancer treatment medications which are less  
73 favorable to the covered person than cost-sharing requirements  
74 for intravenous or injected cancer treatment medications covered  
75 under the contract.

76 (3) A health maintenance organization that provides a  
77 contract described in subsection (2), and any participating  
78 entity through which the health maintenance organization offers  
79 health services, may not:

80 (a) Vary the terms of a contract in effect on July 1, 2013,  
81 in order to avoid compliance with this section.

82 (b) Provide any incentive, including, but not limited to, a  
83 monetary incentive, or impose treatment limitations to encourage  
84 a covered person to accept less than the minimum protections  
85 available under this section.

86 (c) Penalize a health care practitioner or reduce or limit  
87 the compensation of a health care practitioner for recommending  
88 or providing services or care to a covered person as required  
89 under this section.

90 (d) Provide any incentive, including, but not limited to, a  
91 monetary incentive, to induce a health care practitioner to  
92 provide care or services that do not comply with this section.

93 (e) Change the classification of any intravenous or  
94 injected cancer treatment medication or increase the amount of  
95 cost sharing applicable to any intravenous or injected cancer  
96 treatment medication in effect on July 1, 2013, in order to  
97 comply with this section.

98 Section 56. Effective July 1, 2013, subsection (2) of  
99 section 627.6515, Florida Statutes, is amended to read:

100 627.6515 Out-of-state groups.-



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101           (2) Except as otherwise provided in this part, this part  
102 does not apply to a group health insurance policy issued or  
103 delivered outside this state under which a resident of this  
104 state is provided coverage if:

105           (a) The policy is issued to an employee group the  
106 composition of which is substantially as described in s.  
107 627.653; a labor union group or association group the  
108 composition of which is substantially as described in s.  
109 627.654; an additional group the composition of which is  
110 substantially as described in s. 627.656; a group insured under  
111 a blanket health policy when the composition of the group is  
112 substantially in compliance with s. 627.659; a group insured  
113 under a franchise health policy when the composition of the  
114 group is substantially in compliance with s. 627.663; an  
115 association group to cover persons associated in any other  
116 common group, which common group is formed primarily for  
117 purposes other than providing insurance; a group that is  
118 established primarily for the purpose of providing group  
119 insurance, provided the benefits are reasonable in relation to  
120 the premiums charged thereunder and the issuance of the group  
121 policy has resulted, or will result, in economies of  
122 administration; or a group of insurance agents of an insurer,  
123 which insurer is the policyholder;

124           (b) Certificates evidencing coverage under the policy are  
125 issued to residents of this state and contain in contrasting  
126 color and not less than 10-point type the following statement:  
127 "The benefits of the policy providing your coverage are governed  
128 primarily by the law of a state other than Florida"; and

129           (c) The policy provides the benefits specified in ss.



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130 627.419, 627.42391, 627.6574, 627.6575, 627.6579, 627.6612,  
131 627.66121, 627.66122, 627.6613, 627.667, 627.6675, 627.6691, and  
132 627.66911, and complies with the requirements of s. 627.66996.

133 (d) Applications for certificates of coverage offered to  
134 residents of this state must contain, in contrasting color and  
135 not less than 12-point type, the following statement on the same  
136 page as the applicant's signature:

137  
138 "This policy is primarily governed by the laws of  
139 ...insert state where the master policy if filed....  
140 As a result, all of the rating laws applicable to  
141 policies filed in this state do not apply to this  
142 coverage, which may result in increases in your  
143 premium at renewal that would not be permissible under  
144 a Florida-approved policy. Any purchase of individual  
145 health insurance should be considered carefully, as  
146 future medical conditions may make it impossible to  
147 qualify for another individual health policy. For  
148 information concerning individual health coverage  
149 under a Florida-approved policy, consult your agent or  
150 the Florida Department of Financial Services."  
151

152 This paragraph applies only to group certificates providing  
153 health insurance coverage which require individualized  
154 underwriting to determine coverage eligibility for an individual  
155 or premium rates to be charged to an individual except for the  
156 following:

157 1. Policies issued to provide coverage to groups of persons  
158 all of whom are in the same or functionally related licensed



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159 professions, and providing coverage only to such licensed  
160 professionals, their employees, or their dependents;

161 2. Policies providing coverage to small employers as  
162 defined by s. 627.6699. Such policies shall be subject to, and  
163 governed by, the provisions of s. 627.6699;

164 3. Policies issued to a bona fide association, as defined  
165 by s. 627.6571(5), provided that there is a person or board  
166 acting as a fiduciary for the benefit of the members, and such  
167 association is not owned, controlled by, or otherwise associated  
168 with the insurance company; or

169 4. Any accidental death, accidental death and  
170 dismemberment, accident-only, vision-only, dental-only, hospital  
171 indemnity-only, hospital accident-only, cancer, specified  
172 disease, Medicare supplement, products that supplement Medicare,  
173 long-term care, or disability income insurance, or similar  
174 supplemental plans provided under a separate policy,  
175 certificate, or contract of insurance, which cannot duplicate  
176 coverage under an underlying health plan, coinsurance, or  
177 deductibles or coverage issued as a supplement to workers'  
178 compensation or similar insurance, or automobile medical-payment  
179 insurance.

180 Section 57. Sections 627.42391 and 641.313, Florida  
181 Statutes, as created by this act apply to policies and contracts  
182 issued or renewed on or after that date.

183  
184 ===== T I T L E A M E N D M E N T =====

185 And the title is amended as follows:

186 Delete line 231

187 and insert:



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188 associations; providing a short title; creating ss.  
189 627.42391 and 641.313, F.S.; providing definitions;  
190 requiring that an individual or group insurance policy  
191 or a health maintenance contract that provides  
192 coverage for cancer treatment medications provide  
193 coverage for orally administered cancer treatment  
194 medications on a basis no less favorable than that  
195 required by the policy or contract for intravenously  
196 administered or injected cancer treatment medications;  
197 prohibiting insurers, health maintenance  
198 organizations, and certain other entities from  
199 engaging in specified actions to avoid compliance with  
200 this act; amending s. 627.6515, F.S.; adding a cross-  
201 reference to conform to changes made by the act;  
202 providing applicability; providing effective dates.