

A bill to be entitled

An act relating to health insurance; creating ss. 627.64194 and 627.66915, F.S., and amending s. 641.31, F.S.; requiring individual accident or health insurance policies, group, blanket, or franchise accident or health insurance policies, and managed care plans to evaluate and review coverage for orthotics and prosthetics and orthoses and prostheses; providing requirements and limitations; specifying deductible and copayment recommendations; authorizing insurers to define certain benefits limitations; providing for nonapplication to certain policy coverages; providing an effective date.

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

Section 1. Section 627.64194, Florida Statutes, is created to read:

627.64194 Coverage for orthotics and prosthetics and orthoses and prostheses.—Each accident or health insurance policy issued, amended, delivered, or renewed in this state on or after July 1, 2016, which provides medical coverage that includes physician services in a physician's office and that provides major medical or similar comprehensive type coverage must evaluate and review coverage for orthotics and prosthetics and orthoses and prostheses as those terms are defined in s.

27 468.80. Such evaluation and review must compare the coverage
28 provided under federal law by health insurance for the aged and
29 disabled pursuant to 42 U.S.C. ss. 1395k, 1395l, and 1395m and
30 42 C.F.R. ss. 410.100, 414.202, 414.210, and 414.228, and as
31 applicable to this section.

32 (1) The insurance policy may require recommendations for
33 orthotics and prosthetics and orthoses and prostheses in the
34 same manner that prior authorization is required for any other
35 covered benefit.

36 (2) Recommended benefits for orthoses or prostheses are
37 limited to the most appropriate model that adequately meets the
38 medical needs of the patient as determined by the insured's
39 treating physician. Subject to copayments and deductibles, the
40 repair and replacement of orthoses or prostheses are also
41 recommended unless necessitated by misuse or loss.

42 (3) An insurer may require that benefits recommended
43 pursuant to this section be covered benefits only if orthotics
44 or prosthetics are rendered by an orthotist or prosthetist and
45 the orthoses or prostheses are provided by a vendor.

46 (4) This section does not apply to insurance coverage
47 recommended benefits for hospital confinement indemnity,
48 disability income, accident only, long-term care, Medicare
49 supplement, limited benefit health, specified disease indemnity,
50 sickness or bodily injury or death by accident or both, and
51 other limited benefit policies.

52 Section 2. Section 627.66915, Florida Statutes, is created

53 to read:

54 627.66915 Recommended coverage for orthoses and prostheses
 55 and orthotics and prosthetics.—Each group, blanket, or franchise
 56 accident or health insurance policy issued, amended, delivered,
 57 or renewed in this state on or after July 1, 2016, which
 58 recommends coverage for physician services in a physician's
 59 office and that provides major medical or similar comprehensive
 60 type coverage must recommend coverage for orthotics and
 61 prosthetics and orthoses and prostheses as those terms are
 62 defined in s. 468.80. Such recommendation must equal the
 63 coverage provided under federal law by health insurance for the
 64 aged and disabled pursuant to 42 U.S.C. ss. 1395k, 1395l, and
 65 1395m and 42 C.F.R. ss. 410.100, 414.202, 414.210, and 414.228,
 66 and as applicable to this section.

67 (1) The recommended coverage is subject to the deductible
 68 and coinsurance provisions applicable to outpatient visits and
 69 to all other terms and conditions applicable to other benefits.

70 (2) For an appropriate additional premium, an insurer
 71 subject to this section shall make available to the
 72 policyholder, as part of the application, the recommended
 73 coverage in this section without such coverage being subject to
 74 the deductible or coinsurance provisions of the policy.

75 (3) The insurance policy may recommend prior authorization
 76 for orthotics and prosthetics and orthoses and prostheses in the
 77 same manner that prior authorization is recommended for any
 78 other covered benefit.

79 (4) Recommended benefits for orthoses or prostheses are
 80 limited to the most appropriate model that adequately meets the
 81 medical needs of the patient as determined by the insured's
 82 treating physician. Subject to copayments and deductibles, the
 83 repair and replacement of orthoses or prostheses are also
 84 recommended, unless necessitated by misuse or loss.

85 (5) An insurer may recommend that benefits evaluated and
 86 reviewed pursuant to this section be recommended benefits only
 87 if orthotics or prosthetics are rendered by an orthotist or
 88 prosthetist and the orthoses or prostheses are provided by a
 89 vendor.

90 (6) This section does not apply to insurance
 91 recommendations providing benefits for hospital confinement
 92 indemnity, disability income, accident only, long-term care,
 93 Medicare supplement, limited benefit health, specified disease
 94 indemnity, sickness or bodily injury or death by accident or
 95 both, and other limited benefit policies.

96 Section 3. Subsection (44) is added to section 641.31,
 97 Florida Statutes, to read:

98 641.31 Health maintenance contracts.—

99 (44) Each health maintenance contract issued, amended,
 100 delivered, or renewed in this state on or after July 1, 2016,
 101 which recommends medical coverage that includes physician
 102 services in a physician's office and that recommends major
 103 medical or similar comprehensive type coverage must evaluate and
 104 review coverage for orthotics and prosthetics and orthoses and

105 prostheses as those terms are defined in s. 468.80. Such
106 recommended coverage must equal the coverage provided under
107 federal law by health insurance for the aged and disabled
108 pursuant to 42 U.S.C. ss. 1395k, 1395l, and 1395m and 42 C.F.R.
109 ss. 410.100, 414.202, 414.210, and 414.228, and as applicable to
110 this section.

111 (a) The recommendation is subject to the deductible and
112 coinsurance provisions applicable to outpatient visits and to
113 all other terms and conditions applicable to other benefits.

114 (b) For an appropriate additional premium, a health
115 maintenance organization subject to this subsection shall
116 recommend to the subscriber, as part of the application, the
117 coverage required in this subsection without such coverage being
118 subject to the deductible or coinsurance provisions of the
119 contract.

120 (c) A health maintenance contract may require prior
121 authorization for orthotics and prosthetics and orthoses and
122 prostheses in the same manner that prior authorization is
123 required for any other recommended benefit.

124 (d) Recommended benefits for orthoses or prostheses are
125 limited to the most appropriate model that adequately meets the
126 medical needs of the patient as determined by the insured's
127 treating physician. Subject to copayments and deductibles, the
128 repair and replacement of orthoses or prostheses are also
129 recommended, unless necessitated by misuse or loss.

130 (e) A health maintenance contract may require that

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131 benefits recommended pursuant to this subsection be recommended
132 benefits only if orthotics or prosthetics are rendered by an
133 orthotist or prosthetist and the orthoses or prostheses are
134 provided by a vendor.

135 (f) This subsection does not apply to insurance coverage
136 providing benefits for hospital confinement indemnity,
137 disability income, accident only, long-term care, Medicare
138 supplement, limited benefit health, specified disease indemnity,
139 sickness or bodily injury or death by accident or both, and
140 other limited benefit policies.

141 Section 4. This act shall take effect July 1, 2016.