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LEGISLATIVE ACTION

Senate

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House

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Floor: WD

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04/22/2015 02:35 PM

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Senator Latvala moved the following:

Senate Amendment (with title amendment)

Delete line 447

and insert:

Section 10. Effective January 1, 2016, subsection (3) is added to section 627.6474, Florida Statutes, to read:

627.6474 Provider contracts.—

(3) (a) A health insurer may not require an ophthalmologist licensed pursuant to chapter 458 or chapter 459 or an optometrist licensed pursuant to chapter 463 to join a network solely for the purpose of credentialing the licensee for another



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12 insurer's vision network. This paragraph does not prevent a
13 health insurer from entering into a contract with another
14 insurer's vision care plan to use the vision network.

15 (b) A health insurer may not restrict or limit an
16 ophthalmologist licensed pursuant to chapter 458 or chapter 459,
17 an optometrist licensed pursuant to chapter 463, or an optician
18 licensed pursuant to part I of chapter 484 to specific suppliers
19 of materials or optical laboratories. This paragraph does not
20 restrict or limit a health insurer in determining specific
21 amounts of coverage or reimbursement for the use of network or
22 out-of-network suppliers or laboratories.

23 (c) A health insurer's online vision care network provider
24 directory must be updated monthly to reflect the vision care
25 providers currently participating in the health insurer's
26 network.

27 (d) A knowing violation of paragraph (a) or paragraph (b)
28 constitutes an unfair insurance trade practice under s.
29 626.9541(1)(d).

30 Section 11. Effective January 1, 2016, subsection (14) is
31 added to section 636.035, Florida Statutes, to read:

32 636.035 Provider arrangements.—

33 (14) (a) A prepaid limited health service organization may
34 not require an ophthalmologist licensed pursuant to chapter 458
35 or chapter 459 or an optometrist licensed pursuant to chapter
36 463 to join a network solely for the purpose of credentialing
37 the licensee for another organization's vision network. This
38 paragraph does not prevent such organization from entering into
39 a contract with another organization's vision care plan to use
40 the vision network.



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41 (b) A prepaid limited health service organization may not
42 restrict or limit an ophthalmologist licensed pursuant to
43 chapter 458 or chapter 459, an optometrist licensed pursuant to
44 chapter 463, or an optician licensed pursuant to part I of
45 chapter 484 to specific suppliers of materials or optical
46 laboratories. This paragraph does not restrict or limit such
47 organization in determining specific amounts of coverage or
48 reimbursement for the use of network or out-of-network suppliers
49 or laboratories.

50 (c) A prepaid limited health service organization's online
51 vision care network provider directory must be updated monthly
52 to reflect the vision care providers currently participating in
53 the organization's network.

54 (d) A knowing violation of paragraph (a) or paragraph (b)
55 constitutes an unfair insurance trade practice under s.
56 626.9541(1)(d).

57 Section 12. Effective January 1, 2016, subsection (12) is
58 added to section 641.315, Florida Statutes, to read:

59 641.315 Provider contracts.—

60 (12) (a) A health maintenance organization may not require
61 an ophthalmologist licensed pursuant to chapter 458 or chapter
62 459 or an optometrist licensed pursuant to chapter 463 to join a
63 network solely for the purpose of credentialing the licensee for
64 another organization's vision network. This paragraph does not
65 prevent such organization from entering into a contract with
66 another organization's vision care plan to use the vision
67 network.

68 (b) A health maintenance organization may not restrict or
69 limit an ophthalmologist licensed pursuant to chapter 458 or



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70 chapter 459, an optometrist licensed pursuant to chapter 463, or
71 an optician licensed pursuant to part I of chapter 484 to
72 specific suppliers of materials or optical laboratories. This
73 paragraph does not restrict or limit such organization in
74 determining specific amounts of coverage or reimbursement for
75 the use of network or out-of-network suppliers or laboratories.

76 (c) A health maintenance organization's online vision care
77 network provider directory must be updated monthly to reflect
78 the vision care providers currently participating in the
79 organization's network.

80 (d) A knowing violation of paragraph (a) or paragraph (b)
81 constitutes an unfair insurance trade practice under s.
82 626.9541(1)(d).

83 Section 13. Except as otherwise expressly provided in this
84 act, this act shall take effect July 1, 2015.

85
86 ===== T I T L E A M E N D M E N T =====

87 And the title is amended as follows:

88 Delete lines 2 - 48

89 and insert:

90 An act relating to insurance; amending s. 627.062,
91 F.S.; restricting to certain property rate filings a
92 requirement that the chief executive officer or chief
93 financial officer and chief actuary of a property
94 insurer certify the information contained in a rate
95 filing; amending s. 627.0628, F.S.; requiring an
96 insurer to employ in certain rate filings actuarial
97 methods, principles, standards, models, or output
98 ranges found by the Florida Commission on Hurricane



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99 Loss Projection Methodology to be accurate or reliable
100 in determining probable maximum loss levels;
101 authorizing an insurer to employ a model in a rate
102 filing until 120 days after the expiration of the
103 commission's acceptance of that model; prohibiting
104 insurers from modifying or adjusting the model after
105 the commission finds the model to be accurate or
106 reliable in determining probable maximum loss levels;
107 amending s. 627.0645, F.S.; exempting commercial
108 nonresidential multiperil insurance from annual base
109 rate filing; amending s. 627.3518, F.S.; conforming a
110 cross-reference; amending s. 627.4133, F.S.;
111 increasing the amount of prior notice required with
112 respect to the nonrenewal, cancellation, or
113 termination of certain insurance policies; deleting
114 certain provisions that require extended periods of
115 prior notice with respect to the nonrenewal,
116 cancellation, or termination of certain insurance
117 policies; prohibiting the cancellation of certain
118 policies that have been in effect for a specified
119 amount of time except under certain circumstances;
120 amending s. 627.7074, F.S.; revising notification
121 requirements for participation in the neutral
122 evaluation program; amending s. 627.736, F.S.;
123 revising the period for applicability of certain
124 Medicare fee schedules or payment limitations;
125 exempting certain federally certified entities from
126 the requirement to be licensed in order to receive
127 reimbursement under the Florida Motor Vehicle No-Fault



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128 Law; amending s. 627.744, F.S.; revising preinsurance
129 inspection requirements for private passenger motor
130 vehicles; amending s. 631.65, F.S.; authorizing,
131 rather than prohibiting, an advertisement or a
132 solicitation to use the existence of the Florida
133 Insurance Guaranty Association to sell, solicit, or
134 induce the purchase of certain insurance if the
135 advertisement or solicitation explains specified
136 coverage limits; amending ss. 627.6474, 636.035, and
137 641.315, F.S.; providing that a health insurer, a
138 prepaid limited health service organization, and a
139 health maintenance organization, respectively, may not
140 require a licensed ophthalmologist or optometrist to
141 join a network solely for the purpose of credentialing
142 the licensee for another vision network; providing
143 that such insurers and organizations are not prevented
144 by the act from entering into a contract with another
145 vision care plan; providing that such insurers and
146 organizations may not restrict or limit a licensed
147 ophthalmologist, optometrist, or optician to specific
148 suppliers of materials or optical laboratories;
149 providing that such insurers and organizations are not
150 restricted or limited by the act in determining
151 certain amounts of coverage or reimbursement;
152 requiring such insurers' and organizations' online
153 vision care network provider directories to be updated
154 monthly; providing that a violation of certain
155 prohibitions in the act constitutes a specified unfair
156 insurance trade practice; providing effective dates.