

By Senator Soto

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1 A bill to be entitled
2 An act relating to insurance coverage for mental and
3 nervous disorders; amending s. 627.668, F.S.;
4 providing that certain coverage for mental and nervous
5 disorders under specified health insurance policies or
6 contracts is mandatory, rather than optional; revising
7 requirements for inpatient benefits under such
8 coverage to permit transferring unused benefits to
9 outpatient or residential treatment benefits;
10 redefining and revising limits for outpatient
11 benefits; revising limits for partial hospitalization
12 benefits; conforming provisions to changes made by the
13 act; providing an effective date.

14
15 Be It Enacted by the Legislature of the State of Florida:

16
17 Section 1. Section 627.668, Florida Statutes, is amended to
18 read:

19 627.668 Mandatory ~~Optional~~ coverage for mental and nervous
20 disorders ~~required~~; exception.—

21 (1) Every insurer, health maintenance organization, and
22 nonprofit hospital and medical service plan corporation
23 transacting group health insurance or providing prepaid health
24 care in this state shall make available to the policyholder as
25 part of the application, ~~for an appropriate additional premium~~
26 under a group hospital and medical expense-incurred insurance
27 policy, under a group prepaid health care contract, and under a
28 group hospital and medical service plan contract, the benefits
29 or level of benefits specified in subsection (2) for the
30 necessary care and treatment of mental and nervous disorders, as
31 defined in the standard nomenclature of the American Psychiatric
32 Association, subject to the right of the applicant for a group

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33 policy or contract to select any alternative benefits or level
34 of benefits as may be offered by the insurer, health maintenance
35 organization, or service plan corporation provided that, if
36 alternate inpatient, outpatient, ~~or~~ partial hospitalization, or
37 residential treatment benefits are selected, such benefits shall
38 not be less than the level of benefits required under subsection
39 (2) paragraph (2) (a), paragraph (2) (b), or paragraph (2) (c),
40 respectively.

41 (2) Under group policies or contracts, inpatient hospital
42 benefits, partial hospitalization benefits, and outpatient
43 benefits consisting of durational limits, dollar amounts,
44 deductibles, and coinsurance factors shall not be less favorable
45 than for physical illness generally, except that:

46 (a) Inpatient benefits may be limited to not less than 45
47 ~~30~~ days per benefit year as defined in the policy or contract.
48 If inpatient hospital benefits are provided beyond 45 ~~30~~ days
49 per benefit year, the durational limits, dollar amounts, and
50 coinsurance factors thereto need not be the same as applicable
51 to physical illness generally. However, the policy or contract
52 must provide that unused inpatient hospital benefits may be
53 transferred to either outpatient benefits or residential
54 treatment benefits.

55 (b) Outpatient benefits may be limited to 30 hours of
56 ~~\$1,000 for~~ consultations with a licensed physician, a
57 psychologist licensed pursuant to chapter 490, a mental health
58 counselor licensed pursuant to chapter 491, a marriage and
59 family therapist licensed pursuant to chapter 491, and a
60 clinical social worker licensed pursuant to chapter 491. If
61 benefits are provided beyond 30 hours ~~the \$1,000~~ per benefit

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62 year, the durational limits, dollar amounts, and coinsurance
63 factors thereof need not be the same as applicable to physical
64 illness generally.

65 (c) Partial hospitalization benefits shall be provided
66 under the direction of a licensed physician. For purposes of
67 this part, the term "partial hospitalization services" is
68 defined as those services offered by a program that is
69 accredited by an accrediting organization whose standards
70 incorporate comparable regulations required by this state.
71 Alcohol rehabilitation programs accredited by an accrediting
72 organization whose standards incorporate comparable regulations
73 required by this state or approved by the state and licensed
74 drug abuse rehabilitation programs shall also be qualified
75 providers under this section. In a given benefit year, if
76 partial hospitalization services or a combination of inpatient
77 and partial hospitalization are used, the total benefits paid
78 for all such services may not exceed the cost of 121 ~~30~~ days
79 after inpatient hospitalization for psychiatric services,
80 including physician fees, which prevail in the community in
81 which the partial hospitalization services are rendered. If
82 partial hospitalization services benefits are provided beyond
83 the limits set forth in this paragraph, the durational limits,
84 dollar amounts, and coinsurance factors thereof need not be the
85 same as those applicable to physical illness generally.

86 (3) Insurers must maintain strict confidentiality regarding
87 psychiatric and psychotherapeutic records submitted to an
88 insurer for the purpose of reviewing a claim for benefits
89 payable under this section. These records submitted to an
90 insurer are subject to the limitations of s. 456.057, relating

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91 to the furnishing of patient records.

92 Section 2. This act shall take effect July 1, 2016.