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LEGISLATIVE ACTION

Senate

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House

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Floor: WD/RM

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03/11/2016 04:58 PM

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Senator Garcia moved the following:

Senate Amendment (with title amendment)

Between lines 312 and 313

insert:

Section 12. Paragraph (b) of subsection (3) of section
627.6686, Florida Statutes, is amended to read:

627.6686 Coverage for individuals with autism spectrum
disorder required; exception.—

(3) A health insurance plan issued or renewed on or after
April 1, 2009, shall provide coverage to an eligible individual
for:



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12 (b) Treatment of autism spectrum disorder and down syndrome
13 through speech therapy, occupational therapy, physical therapy,
14 and applied behavior analysis. Applied behavior analysis
15 services shall be provided by an individual certified pursuant
16 to s. 393.17 or an individual licensed under chapter 490 or
17 chapter 491.

18 Section 13. Paragraph (b) of subsection (3) of section
19 641.31098, Florida Statutes, is amended to read:

20 641.31098 Coverage for individuals with developmental
21 disabilities.—

22 (3) A health maintenance contract issued or renewed on or
23 after April 1, 2009, shall provide coverage to an eligible
24 individual for:

25 (b) Treatment of autism spectrum disorder and down
26 syndrome, through speech therapy, occupational therapy, physical
27 therapy, and applied behavior analysis services. Applied
28 behavior analysis services shall be provided by an individual
29 certified pursuant to s. 393.17 or an individual licensed under
30 chapter 490 or chapter 491.

31 Section 14. Notwithstanding the enactment of subsection (2)
32 made to s. 627.42392, Florida Statutes, by HB 423, 1st Eng.,
33 2016 Regular Session, subsection (2) of s. 627.42392, Florida
34 Statutes, is enacted to read:

35 (2) Notwithstanding any other provision of law,
36 effective January 1, 2017 or six (6) months after the effective
37 date of the rule adopting the prior authorization form,
38 whichever is later, a health insurer, or a pharmacy benefits
39 manager on behalf of the health insurer, which does not provide
40 an electronic prior authorization process for use by its



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41 contracted providers, shall only use the prior authorization
42 form that has been approved by the Financial Services
43 Commission for granting a prior authorization for a medical
44 procedure, course of treatment, or prescription drug benefit.
45 Such form may not exceed two pages in length, excluding any
46 instructions or guiding documentation, and must include all
47 clinical documentation necessary for health insurer to make a
48 decision. At a minimum, the form must include: (1) sufficient
49 patient information to identify the member, date of birth, full
50 name, and Health Plan ID number; (2) Provider name, address and
51 phone number; (3) the medical procedure, course of treatment, or
52 prescription drug benefit being requested, including the medical
53 reason therefor, and all services tried and failed; (4) any
54 laboratory documentation required; and (5) an attestation that
55 all information provided is true and accurate.

56 Section 15. It is the intent of the Legislature that the
57 enactment of s. 627.42392(2), Florida Statutes, made by this act
58 shall control over the enactment of that subsection made by HB
59 423, 1st Eng., 2016 Regular Session, regardless of the order in
60 which the bills are enacted.

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62
63 ===== T I T L E A M E N D M E N T =====

64 And the title is amended as follows:

65 Delete line 46

66 and insert:

67 insurance, and franchise health insurance; amending s.
68 627.6686, F.S.; requiring a specified health insurance
69 plan to provide specified coverage for treatment of



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70 down syndrome; amending s. 641.31098, F.S.; requiring
71 a specified health maintenance contract to provide
72 specified health maintenance contract to provide
73 specified coverage for treatment of down syndrome;
74 enacting s. 627.42392, F.S.; requiring a health
75 insurer or a pharmacy benefits manager to only use a
76 certain form; providing requirements for such form;
77 providing