

1                   A bill to be entitled  
2           An act relating to health insurance; providing a short  
3           title; prohibiting increases to copayment or  
4           deductible amounts covered under a health insurance  
5           policy during the policy year if an insured is  
6           diagnosed with the HIV infection or AIDS; prohibiting  
7           removal of a physician who is treating such insured  
8           from the provider network during the policy year,  
9           except under specified circumstances; amending s.  
10          641.3007, F.S.; prohibiting health maintenance  
11          organization contracts that include prescription drug  
12          benefits from including HIV/AIDS drugs at the highest  
13          classification, copayment, or cost-sharing tiers;  
14          requiring such contracts to require coverage and  
15          classification of such drugs at certain rates;  
16          prohibiting certain restrictions on such drugs except  
17          under certain circumstances; amending s. 641.31, F.S.;  
18          prohibiting increases to copayment or deductible  
19          amounts covered under a health maintenance contract or  
20          prepaid health plan during the contract or plan year  
21          if an insured is diagnosed with the HIV infection or  
22          AIDS; prohibiting removal of a physician who is  
23          treating such insured from the provider network during  
24          the contract or plan year, except under specified  
25          circumstances; providing an effective date.

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

Section 1. This act may be cited as the "Health Equity Assurance Act."

Section 2. Health insurance policies; limitation on changes to copayment or deductible amounts and provider network.—An individual or group insurance policy that is delivered, issued for delivery, renewed, amended, or continued in this state which provides medical, major medical, or similar comprehensive coverage may not:

(1) Increase the copayment or deductible amounts for prescription drug benefits, clinical or physician services, or other health care-related services during the policy year if an insured is diagnosed with the HIV infection or AIDS, as those terms are defined in s. 627.429, Florida Statutes.

(2) Remove any physician who is treating an insured who is diagnosed with the HIV infection or AIDS from the health insurer's provider network during the policy year, unless the physician poses an imminent threat to patient health and safety.

Section 3. Paragraph (c) is added to subsection (5) of section 641.3007, Florida Statutes, to read:

641.3007 HIV infection and AIDS for contract purposes.—

(5) RESTRICTIONS ON CONTRACT EXCLUSIONS AND LIMITATIONS.—

(c) A health maintenance organization contract that

51 includes prescription drug benefits may not include drugs that  
52 are for the benefit of preventing the transmission of or  
53 treating exposure to the HIV infection, or a specific sickness  
54 or medical condition derived from such condition, at the highest  
55 classification, copayment, or cost-sharing tiers. The contract  
56 must require the coverage and classification of all HIV/AIDS  
57 drugs to be established at either the lowest-priced generic rate  
58 or the nonpreferred brand rate, as appropriate for the specific  
59 drug. An HIV/AIDS drug may not be subject to prior authorization  
60 procedures for refills, step-therapy requirements, drug quantity  
61 limitations, or other utilization management techniques, except  
62 as prescribed by the treating provider.

63 Section 4. Subsection (44) is added to section 641.31,  
64 Florida Statutes, to read:

65 641.31 Health maintenance contracts.—

66 (44) Notwithstanding any other provision in this section,  
67 a health maintenance contract or prepaid health plan that is  
68 delivered, issued for delivery, renewed, amended, or continued  
69 in this state which provides medical, major medical, or similar  
70 comprehensive coverage may not:

71 (a) Increase the copayment or deductible amounts for  
72 prescription drug benefits, clinical or physician services, or  
73 other health care-related services during the contract or plan  
74 year if an insured is diagnosed with the HIV infection or AIDS,  
75 as those terms are defined in s. 627.429.

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76        (b) Remove any physician who is treating an insured who is  
77        diagnosed with the HIV infection or AIDS from the health  
78        maintenance organization's or prepaid health plan's provider  
79        network during the contract or plan year, unless the physician  
80        poses an imminent threat to patient health and safety.

81        Section 5. This act shall take effect July 1, 2017.