

Amendment No.

COMMITTEE/SUBCOMMITTEE ACTION

ADOPTED	<u>    </u>	(Y/N)
ADOPTED AS AMENDED	<u>    </u>	(Y/N)
ADOPTED W/O OBJECTION	<u>    </u>	(Y/N)
FAILED TO ADOPT	<u>    </u>	(Y/N)
WITHDRAWN	<u>    </u>	(Y/N)
OTHER	<u>      </u>	

---

1 Committee/Subcommittee hearing bill: Health Innovation  
 2 Subcommittee

3 Representative Renner offered the following:

4

5 **Amendment (with title amendment)**

6 Remove everything after the enacting clause and insert:

7 Section 1. Section 627.6387, Florida Statutes, is created  
 8 to read:

9 627.6387 Shared savings incentive program.-

10 (1) This section may be cited as the "Patient Savings  
 11 Act".-

12 (2) As used in this section, the term:

13 (a) "Average price" means the average amount paid to an  
 14 in-network health care provider for a shoppable health care  
 15 service within a 1-year period or as determined by another  
 16 method approved by the office.

Amendment No.

17        (b) "Contracted amount" means the amount agreed to be paid  
18 by the health insurer pursuant to a policy, contract, or  
19 certificate of insurance to a health care provider for shoppable  
20 health care services covered by the policy, contract, or  
21 certificate of insurance, including any facility fees charged by  
22 the provider.

23        (c) "Health care provider" means a hospital, ambulatory  
24 surgical center, and other medical facility licensed under  
25 chapter 395; a home health agency licensed under chapter 400; a  
26 physician licensed under chapter 458; a physician assistant  
27 licensed under chapter 458 or chapter 459; an osteopathic  
28 physician licensed under chapter 459; a chiropractic physician  
29 licensed under chapter 460; a podiatric physician licensed under  
30 chapter 461; a naturopath licensed under chapter 462; a dentist  
31 licensed under chapter 466; nurses licensed under part I of  
32 chapter 464; a midwife licensed under chapter 467; an  
33 occupational therapist licensed under chapter 468; radiological  
34 personnel certified under chapter 468; a clinical laboratory  
35 licensed under chapter 483; a physical therapist and a physical  
36 therapist assistant licensed under chapter 486; a blood bank,  
37 plasma center, industrial clinic, and renal dialysis facility;  
38 or a professional association, partnership, corporation, joint  
39 venture, or other association for professional activity by  
40 health care providers.

686687 - h0449-strike.docx

Published On: 2/21/2017 6:03:59 PM

Amendment No.

41 (d) "Health insurer" means an authorized insurer offering  
42 health insurance as defined in s. 624.603 or a health  
43 maintenance organization as defined in s. 641.19(12).

44 (e) "Shared savings incentive program" means a cash  
45 incentive program established by a health insurer pursuant to  
46 this section.

47 (f) "Shoppable health care service" means a nonemergency  
48 health care service for which an insured may receive a cash  
49 payment under a shared savings incentive program. Shoppable  
50 health care services include:

- 51 1. Clinical laboratory services.
- 52 2. Infusion therapy.
- 53 3. Inpatient and outpatient surgical procedures.
- 54 4. Obstetrical and gynecological services.
- 55 5. Outpatient nonsurgical diagnostic tests and procedures.
- 56 6. Physical and occupational therapy services.
- 57 7. Radiology and imaging services.

58 (3) A health insurer's website must provide a method for  
59 an insured or prospective insured to request and obtain  
60 information on the contracted amount for a shoppable health care  
61 service from a health care provider and to compare the average  
62 price among health care providers. The website shall provide  
63 quality information for each shoppable health care service from  
64 each health care provider, if available.

Amendment No.

65 (4) Upon the request of an insured, a health insurer must  
66 provide a good faith estimate of the contracted amount and the  
67 estimated amount of copayments, deductibles, and other cost-  
68 sharing responsibilities for health care services and procedures  
69 within 2 working days after the request for both in-network and  
70 out-of-network providers. The health insurer must notify the  
71 insured that the estimate may differ from the actual amount the  
72 insured will be responsible to pay due to unforeseen  
73 circumstances that arise out of the proposed nonemergency  
74 service or procedure.

75 (5) For the plan year beginning January 1, 2018, and for  
76 each plan year thereafter, a health insurer must implement a  
77 shared savings incentive program to provide a cash payment to an  
78 insured when the insured obtains a shoppable health care service  
79 at a price that is less than the average price for that service.

80 (a) The amount of the shared savings incentive program  
81 payment may be calculated as a percentage between the contracted  
82 amount and the average price, or by an alternative method  
83 approved by the office.

84 (b) The amount of the cash payment to the insured must be  
85 at least 50 percent of the health insurer's saved costs for each  
86 shoppable health care service paid to the health care provider  
87 as compared with the average price.

88 (c) If an insured elects to receive a shoppable health  
89 care service from an out-of-network health care provider for a

Amendment No.

90 price that is less than the average price, the health insurer  
91 must treat such service as if it is provided by an in-network  
92 health care provider for purposes of calculating the shared  
93 savings incentive program payment.

94 (d) A health insurer is not required to provide a cash  
95 payment under the shared savings incentive program to an insured  
96 when the health insurer's saved cost is less than \$50.

97 (e) A cash payment made by a health insurer in accordance  
98 with this section is not an administrative expense for rate  
99 development or rate filing purposes.

100 (6) The shared savings incentive program must be a  
101 component part of the policy, contract, or certificate of  
102 insurance provided by the health insurer. Annually and at the  
103 time of enrollment or renewal, a health insurer must notify each  
104 insured of the shared savings incentive program.

105 (7) A health insurer must file a description of the shared  
106 savings incentive program on a form prescribed by the office.  
107 The office must review the filing to determine if the program  
108 complies with the requirements of this section.

109 (8) A health insurer must file an annual report to the  
110 office of its shared savings incentive program. The report must  
111 include:

112 (a) The total number of cash payments made pursuant to  
113 this section for the calendar year.

Amendment No.

114 (b) Each shoppable health care service, by category, for  
115 which a cash payment was made.

116 (c) The average amount of cash payments.

117 (d) The total amount saved by the health insurer when  
118 compared with the average price for each shoppable health  
119 service category.

120 (e) The total number of insureds and the percentage of  
121 total insureds who participated.

122 (9) (a) The office may impose an administrative penalty of  
123 no more than \$5,000 per violation per day upon a health insurer  
124 for failure to comply with this section. A fine imposed under  
125 this section may be in addition to other penalties or fines  
126 authorized by the insurance code.

127 (b) If a health insurer fails to meet the filing  
128 requirements under this section and does not submit the filing  
129 within 30 days after the due date, the office may order the  
130 health insurer to discontinue issuing policies, contracts, or  
131 certificate of insurance until the filing requirements have been  
132 fulfilled.

133 (c) The office may revoke or suspend for at least 12  
134 months the health insurer's certificate of authority for failure  
135 to comply with this section.

136 (10) The office must submit an annual report to the  
137 President of the Senate and the Speaker of the House of

Amendment No.

138 Representatives by April 1, 2019, and each year thereafter,  
139 which summarizes the reports required by subsection (8).

140 (11) The office may adopt rules necessary to implement and  
141 enforce this section.

142 Section 2. This act shall take effect upon becoming a law.

143

144 -----

145 **T I T L E A M E N D M E N T**

146 Remove lines 2-4 and insert:

147 An act relating to health insurance; creating