HB 821

1	A bill to be entitled
2	An act relating to a patient's choice of providers;
3	providing a short title; providing definitions;
4	prohibiting a health insurer from excluding a willing
5	and qualified health care provider from participating
6	in the health insurer's provider network under certain
7	circumstances; providing an effective date.
8	
9	Be It Enacted by the Legislature of the State of Florida:
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11	Section 1. Patient's choice of providers; discrimination
12	against willing and qualified health care providers prohibited
13	(1) This section may be cited as the "Patient's Freedom of
14	Choice of Providers Act."
15	(2) For purposes of this section, the term:
16	(a) "Health care provider" means a health care
17	professional licensed under chapter 458; chapter 459; chapter
18	460; chapter 461; chapter 463; chapter 464; chapter 465; chapter
19	466; part I, part III, part IV, part V, or part X of chapter
20	468; chapter 483; chapter 484; chapter 486; chapter 490; or
21	chapter 491, Florida Statutes.
22	(b) "Health insurance plan" means health benefits coverage
23	under the following:
24	1. A health plan offered by any certified health
25	maintenance organization or authorized health insurer, except a

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26	plan that is limited to the following: a limited benefit,
27	specified disease, or specified accident; hospital indemnity;
28	accident only; limited benefit convalescent care; Medicare
29	<pre>supplement; credit disability; dental; vision; long-term care;</pre>
30	disability income; coverage issued as a supplement to another
31	health plan; workers' compensation liability or other insurance;
32	or motor vehicle medical payment only; or
33	2. An employee welfare benefit plan that includes health
34	benefits established under the Employee Retirement Income
35	Security Act of 1974, as amended.
36	(c) "Health insurer" means any insurance company
37	authorized to transact health insurance in the state, any
38	insurance company authorized to transact health insurance or
39	casualty insurance in the state that is offering a minimum
40	premium plan or stop-loss coverage for any person or entity
41	providing health care benefits, any self-insurance plan as
42	defined in s. 624.031, Florida Statutes, any health maintenance
43	organization authorized to transact business in the state
44	pursuant to part I of chapter 641, Florida Statutes, any prepaid
45	health clinic authorized to transact business in the state
46	pursuant to part II of chapter 641, Florida Statutes, any
47	multiple-employer welfare arrangement authorized to transact
48	business in the state pursuant to ss. 624.436-624.45, Florida
49	Statutes, or any fraternal benefit society providing health
50	benefits to its members as authorized pursuant to chapter 632,
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51 Florida Statutes. 52 Notwithstanding any other law, a health insurer may (3) 53 not obstruct a patient's choice by excluding a health care provider licensed in this state from participating in the health 54 55 insurer's provider network, if the health care provider is: (a) Located within the geographic coverage area of the 56 57 health insurance plan; and (b) Willing and qualified to meet the terms, conditions, 58 59 and fee schedule established by the health insurer. 60 Section 2. This act shall take effect July 1, 2017.

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