



166758

LEGISLATIVE ACTION

Senate	.	House
Comm: RCS	.	
03/25/2019	.	
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The Committee on Banking and Insurance (Simpson) recommended the following:

**Senate Amendment (with title amendment)**

Delete everything after the enacting clause  
and insert:

Section 1. Study of state essential health benefits  
benchmark plan; report.-

(1) As used in this section, the term:

(a) "EHB-benchmark plan" has the same meaning as provided  
in 45 C.F.R. s. 156.20.

(b) "Office" means the Office of Insurance Regulation.



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11           (2) The office shall conduct a study to evaluate this  
12 state's current EHB-benchmark plan for nongrandfathered  
13 individual and group health plans and options for changing the  
14 EHB-benchmark plan pursuant to 45 C.F.R. s. 156.111 for future  
15 plan years. In conducting the study, the office shall:

16           (a) Consider EHB-benchmark plans and benefits under the 10  
17 essential health benefits categories established under 45 C.F.R.  
18 s. 156.110(a) which are used by the other 49 states;

19           (b) Compare the costs of benefits within such categories  
20 and overall costs of EHB-benchmark plans used by other states  
21 with the costs of benefits within the categories and overall  
22 costs of the current EHB-benchmark plan of this state; and

23           (c) Solicit and consider proposed individual and group  
24 health plans from health insurers and health maintenance  
25 organizations in developing recommendations for changes to the  
26 current EHB-benchmark plan.

27           (3) By October 30, 2019, the office shall submit a report  
28 to the Governor, the President of the Senate, and the Speaker of  
29 the House of Representatives which must include recommendations  
30 for changing the current EHB-benchmark plan to provide  
31 comprehensive care at a lower cost than this state's current  
32 EHB-benchmark plan. In its report, the office shall provide an  
33 analysis as to whether proposed health plans it receives under  
34 paragraph (2) (c) meet the requirements for an EHB-benchmark plan  
35 under 45 C.F.R. s. 156.111(b).

36           (4) Health plans created by health insurers and health  
37 maintenance organizations under this section:

38           (a) May be submitted to the office for consideration as  
39 part of the study under this section; and



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40 (b) May also be submitted to the office for evaluation as  
41 equivalent to the current state EHB-benchmark plan or to any  
42 EHB-benchmark plan created in the future.

43 Section 2. Section 627.443, Florida Statutes, is created to  
44 read:

45 627.443 Essential health benefits.—

46 (1) As used in this section, the term:

47 (a) "EHB-benchmark plan" has the same meaning as provided  
48 in 45 C.F.R. s. 156.20.

49 (b) "PPACA" has the same meaning as in s. 627.402.

50 (2) A health insurer or health maintenance organization  
51 issuing or delivering an individual or a group health insurance  
52 policy or health maintenance contract in this state may create a  
53 new health insurance policy or health maintenance contract that:

54 (a) Must include at least one service or coverage under  
55 each of the 10 essential health benefits categories under 42  
56 U.S.C. s. 18022(b) which are required under PPACA;

57 (b) May fulfill the requirement in paragraph (a) by  
58 selecting one or more services or coverages for each of the  
59 required categories from the list of essential health benefits  
60 required by any single state or multiple states; and

61 (c) May comply with paragraphs (a) and (b) by selecting one  
62 or more services or coverages from any one or more of the  
63 required categories of essential health benefits from one state  
64 or multiple states.

65 (3) This section specifically authorizes an insurer or  
66 health maintenance organization to include any combination of  
67 services or coverages required by any one or a combination of  
68 states to provide the 10 categories of essential health benefits



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69 required under PPACA in a policy or contract issued in this  
70 state.

71 (4) Health insurance policies and health maintenance  
72 contracts created by health insurers and health maintenance  
73 organizations under this section:

74 (a) May be submitted to the office for consideration as  
75 part of the office's study of this state's essential health  
76 benefits benchmark plan; and

77 (b) May also be submitted to the office for evaluation as  
78 equivalent to the current state EHB-benchmark plan or to any  
79 EHB-benchmark plan created in the future.

80 Section 3. This act shall take effect upon becoming a law.

81  
82 ===== T I T L E A M E N D M E N T =====

83 And the title is amended as follows:

84 Delete everything before the enacting clause  
85 and insert:

86 A bill to be entitled  
87 An act relating to essential health benefits under  
88 health plans; defining the terms "EHB-benchmark plan"  
89 and "office"; requiring the Office of Insurance  
90 Regulation to conduct a study evaluating this state's  
91 current benchmark plan for essential health benefits  
92 under the federal Patient Protection and Affordable  
93 Care Act (PPACA) and options for changing the  
94 benchmark plan for future plan years; requiring the  
95 office, in conducting the study, to consider plans and  
96 certain benefits used by other states and compare  
97 costs with those of this state; requiring the office



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98 to solicit and consider proposed health plans from  
99 health insurers and health maintenance organizations  
100 in developing recommendations; requiring the office,  
101 by a certain date, to provide a report with certain  
102 recommendations and a certain analysis to the Governor  
103 and the Legislature; providing that health plans  
104 created by health insurers and health maintenance  
105 organizations may be submitted to the office for  
106 certain purposes; creating s. 627.443, F.S.; defining  
107 the terms "EHB-benchmark plan" and "PPACA";  
108 authorizing health insurers and health maintenance  
109 organizations to create new health insurance policies  
110 and health maintenance contracts meeting certain  
111 criteria for essential health benefits under PPACA;  
112 providing that such criteria may be met by certain  
113 means; providing construction; providing that such  
114 policies and contracts created by health insurers and  
115 health maintenance organizations may be submitted to  
116 the office for certain purposes; providing an  
117 effective date.