

By Senator Simon

3-00763A-23

20231638__

1 A bill to be entitled
2 An act relating to coverage for clinician-administered
3 drugs; creating s. 627.42398, F.S.; defining terms;
4 prohibiting certain acts by insurers or pharmacy
5 benefit managers that cover clinician-administered
6 drugs; providing that violations are deemed unfair
7 methods of competition and unfair practices or acts;
8 providing an effective date.

9
10 Be It Enacted by the Legislature of the State of Florida:

11
12 Section 1. Section 627.42398, Florida Statutes, is created
13 to read:

14 627.42398 Coverage for clinician-administered drugs.-

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

16 (a) "Clinician-administered drug" means a prescription drug
17 other than a vaccine which:

18 1. Cannot reasonably be self-administered by the patient to
19 whom the drug is prescribed or administered by an individual
20 other than a health care provider, or is not approved by the
21 United States Food and Drug Administration as a self-
22 administered drug or biologic; and

23 2. Is typically administered in a physician's office,
24 hospital, outpatient infusion center, or other clinical setting.

25 (b) "Health care provider" means a health care
26 professional, a health care facility, or an entity licensed or
27 certified to provide health care services in this state which
28 meets the criteria established by the Department of Health.

29 (c) "Insurer" means an insurer as defined in s. 624.03, a

3-00763A-23

20231638__

30 multiple-employer welfare arrangement as defined in s.
31 624.437(1), self-insurance as defined in s. 624.031, a prepaid
32 limited health service organization as defined in s. 636.003(7),
33 a health maintenance organization as defined in s. 641.19(12), a
34 prepaid health clinic as defined in s. 641.402, a fraternal
35 benefit society as defined in s. 632.601, or any health care
36 arrangement that assumes some risk.

37 (d) "Participating provider" means a health care provider
38 that participates in an insurer's network.

39 (e) "Pharmacy benefit manager" has the same meaning as in
40 s. 624.490.

41 (f) "Specialty pharmacy" means a pharmacy that focuses on
42 high-cost medications and personalized support for patients with
43 chronic or complex conditions.

44 (g) "White bagging" means an insurer's policy that requires
45 a prescription drug to be:

46 1. Dispensed by a specialty pharmacy selected by the
47 insurer; and

48 2. Transported to a health care provider for administration
49 to a patient.

50 (2) An insurer or a pharmacy benefit manager that covers a
51 clinician-administered drug may not do any of the following:

52 (a) Condition, deny, or reduce payment to a participating
53 provider for providing the covered clinician-administered drug
54 and related services to an insured when all criteria for medical
55 necessity are met, regardless of whether the clinician-
56 administered drug is obtained from a pharmacy selected by the
57 insurer. For the purposes of this section, the location of
58 receiving the physician-administered drug may not be included in

3-00763A-23

20231638__

59 the medical necessity criteria.

60 (b) Interfere with the insured's right to choose to obtain
61 the covered clinician-administered drug from a participating
62 provider or a pharmacy of choice, through inducement, steering,
63 or financial or other incentive offers.

64 (c) Require the covered clinician-administered drug to be
65 dispensed by a pharmacy selected by the insurer, including, but
66 not limited to, through white bagging.

67 (d) If the covered clinician-administered drug is not
68 dispensed by a pharmacy selected by the insurer or pharmacy
69 benefit manager:

70 1. Reimburse for the clinician-administered drug at a
71 lesser amount than the amount that would otherwise be
72 reimbursed;

73 2. Limit or exclude coverage or benefits for the clinician-
74 administered drug; or

75 3. Require a covered person to pay an additional fee, a
76 higher copay, a higher coinsurance, a second copay, a second
77 coinsurance, or any other form of an increased cost-sharing
78 amount over the price paid for the clinician-administered drug
79 if the drug is dispensed by a pharmacy selected by the insurer
80 or pharmacy benefit manager.

81 (e) May not require that a clinician-administered drug be
82 administered using home infusion or require that a clinician-
83 administered drug be sent directly to a third party or to the
84 patient for home infusion, unless the patient's treating
85 physician determines that home infusion of the drug will not
86 jeopardize the health of the patient.

87 (3) The commission of any act prohibited under this section

3-00763A-23

20231638__

88 is deemed an unfair method of competition and unfair practice or
89 act which subjects the violation to any and all actions,
90 remedies, and penalties provided for in part II of chapter 501.

91 Section 2. This act shall take effect on July 1, 2023.