

1                                   A bill to be entitled  
2       An act relating to Florida Health Plan trust fund;  
3       creating s. 641.76, F.S.; creating the Florida Health  
4       Fund for the Florida Health Plan; providing for the  
5       administration of the fund; providing for sources of  
6       funds and purpose; requiring claims for health care  
7       services to be made to the fund; providing for  
8       disbursement from the fund; providing for the accounts  
9       in the fund; requiring moneys received by the fund to  
10      be paid to a specified person; prohibiting such person  
11      from commingling the funds with other moneys;  
12      requiring necessary waivers, exemptions, agreements,  
13      and legislation to be obtained for federal payments  
14      for the fund; providing for future review and  
15      termination or re-creation of the fund; amending s.  
16      641.73, F.S.; defining the term "fund"; amending s.  
17      641.74, F.S.; providing eligibility of certain  
18      retirees for the plan under certain circumstances;  
19      amending s. 641.77, F.S.; providing that the Florida  
20      Health Plan's responsibility for providing health care  
21      is secondary to existing federal programs if funding  
22      for these programs is not transferred to the fund;  
23      amending s. 641.78, F.S.; requiring collateral sources  
24      to pay a certain sum to the fund under certain  
25      circumstances; amending s. 641.793, F.S.; providing

duties of the Florida Health Board relating to the fund; amending s. 641.797, F.S.; providing duties of the plan auditor relating to the fund; providing an appropriation; amending s. 641.798, F.S.; providing applicability of the Code of Ethics for Public Officers and Employees to the employees and the director of the fund; providing an appropriation; providing a contingent effective date.

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

**Section 1. Section 641.76, Florida Statutes, is created to read:**

641.76 Florida Health Fund.—

(1) The Florida Health Fund, a revolving fund, is established under the jurisdiction and control of the Florida Health Board to implement the Florida Health Plan and to receive premiums and other sources of revenue. The fund shall be administered by a director appointed by the board.

(a) All moneys collected, received, and transferred according to this section shall be deposited in the fund. Moneys deposited in the fund shall be used exclusively to finance the plan.

(b) All claims for health care services rendered shall be made to the fund. Payments made for health care services shall

51 be disbursed from the fund.

52 (c) Revenues collected each year must be sufficient to  
53 cover that year's projected costs for the plan.

54 (2) (a) The fund shall have operating, capital, and reserve  
55 accounts.

56 1. The operating account in the fund comprises the  
57 following accounts:

58 a. Medical services account. The medical services account  
59 must be used to provide for all medical services and benefits  
60 covered under the plan.

61 b. Prevention account. The prevention account must be used  
62 to establish and maintain primary community prevention programs,  
63 including preventive screening tests.

64 c. Program administration, evaluation, planning, and  
65 assessment account. The program administration, evaluation,  
66 planning, and assessment account must be used to monitor and  
67 improve the plan's effectiveness and operations. The board may  
68 establish grant programs, including demonstration projects, for  
69 the account's purpose.

70 d. Training and development account. The training and  
71 development account must be used to incentivize the training and  
72 development of health care providers and the health care  
73 workforce needed to meet the health care needs of the  
74 population.

75 e. Health service research account. The health service

76 research account must be used to support research and innovation  
77 as determined by the board and recommended by the Office of  
78 Health Quality and Planning and the Ombudsman Office for Patient  
79 Advocacy.

80 2. The capital account must be used to pay for capital  
81 expenditures for institutional providers.

82 3. The reserve account must at all times hold an amount  
83 estimated in the aggregate to provide for the payment of all  
84 losses and claims for which the plan may be liable and to  
85 provide for the expense of adjustment or settlement of losses  
86 and claims.

87 (b) Money currently held in reserve by state, city, and  
88 county health programs must be transferred to the fund when the  
89 plan replaces those programs.

90 (c) The board shall have provisions in place to insure the  
91 plan against unforeseen expenditures or revenue shortfalls not  
92 covered by the reserve account. The board may borrow money to  
93 cover temporary shortfalls.

94 (3) (a) All moneys received by the fund shall be paid to  
95 the Director of the Office of Finance and Budget as agent of the  
96 board, who may not commingle these funds with any other money.  
97 The moneys in these accounts shall be paid out on warrants drawn  
98 by the commissioner on requisition by the board.

99 (b) The fund shall be separate from the State Treasury.  
100 The board shall manage the fund and has exclusive authority over

101 the fund.

102 (4) (a) The board shall:

103 1. Determine the aggregate cost of providing health care  
104 according to this part.

105 2. Coordinate with existing, ongoing funding sources from  
106 federal and state programs.

107 (b) All federal funding received by this state shall be  
108 appropriated to the fund to be used to administer the plan under  
109 this part. Federal funding that is received for implementing and  
110 administering the plan shall be used to provide health care for  
111 residents of this state.

112 (c) The chief executive officer of the Florida Health Plan  
113 and, if required under federal law, the Secretary of Commerce  
114 shall seek waivers, exemptions, agreements, or legislation  
115 necessary for all current federal payments to this state to be  
116 sent directly to the fund. If any required waiver, exemption,  
117 agreement, or legislation is obtained, the plan must assume  
118 responsibility for all health care benefits and health care  
119 services previously paid for with federal funds. In obtaining  
120 the waivers, exemptions, agreements, or legislation, the chief  
121 executive officer and, if required, the secretary shall seek  
122 from the Federal Government a contribution for health care  
123 services in this state which:

124 1. Reflects medical inflation, the state gross domestic  
125 product, the size and age of the population, the number of

residents living below the poverty level, and the number of individuals eligible for Medicare and veterans' benefits.

2. Does not decrease in relation to the federal contribution to other states as a result of the waivers, exemptions, agreements, or savings from implementation of the plan.

(5) In accordance with s. 19(f)(2), Art. III of the State Constitution, the Florida Health Fund shall, unless terminated sooner, be terminated on July 1, 2030. Before its scheduled termination, the trust fund shall be reviewed as provided in s. 215.3206(1) and (2).

**Section 2. Subsections (2) through (6) of section 641.73, Florida Statutes, as created by HB 1489, 2026 Regular Session, are renumbered as subsections (3) through (7), respectively, and a new subsection (2) is added to that section, to read:**

641.73 Definitions.—As used in this part, the term:

(2) "Fund" means the Florida Health Fund established in s. 641.76.

**Section 3. Paragraph (f) of subsection (1) of section 641.74, Florida Statutes, as created by HB 1489, 2026 Regular Session, is amended to read:**

641.74 Eligibility for and enrollment in the Florida Health Plan.—

(1) ELIGIBILITY.—

(f) All persons who are eligible for retiree health care

benefits under an employer-employee contract remain eligible for those benefits if the contractually mandated payments for those benefits are made to the Florida Health Fund. The fund must assume financial responsibility for care provided under the terms of the contract along with additional health benefits covered by the plan. A retiree who is covered under the plan and who elects to reside outside of this state is eligible for benefits under the terms and conditions of the retiree's employer-employee contract.

**Section 4. Paragraph (c) of subsection (2) of section 641.77, Florida Statutes, as created by HB 1489, 2026 Regular Session, is amended to read:**

641.77 Federal preemption.—

(2)

(c) The Florida Health Plan's responsibility for providing health care is secondary to existing federal programs for health care services to the extent that funding for these programs is not transferred to the Florida Health Fund or that the transfer is delayed beyond the date on which initial benefits are provided under the plan.

**Section 5. Paragraph (a) of subsection (4) of section 641.78, Florida Statutes, as created by HB 1489, 2026 Regular Session, is amended to read:**

641.78 Subrogation.—

(4) If a person who receives health care services under

the plan is entitled to coverage, reimbursement, indemnity, or other compensation from a collateral source, the person must notify the health care provider and provide information identifying the collateral source, the nature and extent of coverage or entitlement, and other relevant information. The health care provider shall forward this information to the board. The person entitled to coverage, reimbursement, indemnity, or other compensation from a collateral source must provide additional information as requested by the board.

(a) The plan shall seek reimbursement from the collateral source for services provided to the person and may take appropriate action, including legal proceedings, to recover the reimbursement. Upon demand, the collateral source shall pay to the Florida Health Fund the sum that it would have paid or spent on behalf of the person for the health care services provided by the plan.

**Section 6. Paragraphs (d) through (o) of subsection (3) of section 641.793, Florida Statutes, as created by HB 1489, 2026 Regular Session, are redesignated as paragraphs (e) through (p), respectively, subsection (1) is amended, a new paragraph (d) is added to subsection (3), and paragraph (h) is added to subsection (5) of that section, to read:**

641.793 Florida Health Board.—

(1) By December 1, 2026, the Florida Health Board shall be established to promote the delivery of high-quality, coordinated



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health care services that enhance health; prevent illness, disease, and disability; slow the progression of chronic diseases; and improve personal health management. The board shall administer the Florida Health Plan. The board shall oversee:

(a) The Office of Health Quality and Planning established in s. 641.795.

(b) The Florida Health Fund.

(3) The board shall:

(d) Hire a director for the Florida Health Fund, who must take the oath described in paragraph (2) (b).

(5) The board has the following financial duties:

(h) Administer the Florida Health Fund, annually determine the appropriate level for the plan reserve account, and implement policies needed to establish the appropriate reserve.

**Section 7. Paragraph (a) of subsection (2) of section 641.797, Florida Statutes, as created by HB 1489, 2026 Regular Session, is amended to read:**

641.797 Auditor for the Florida Health Plan.—

(2) The auditor for the Florida Health Plan shall:

(a) Investigate, audit, and review the financial and business records of the plan and the Florida Health Fund.

**Section 8. Subsection (1) of section 641.798, Florida Statutes, as created by HB 1489, 2026 Regular Session, is amended to read:**

226           641.798 Ethics and conflicts of interest; Conflict of  
227 Interest Committee.—

228           (1) The Code of Ethics for Public Officers and Employees  
229 under part III of chapter 112 applies to the employees and the  
230 chief executive officer of the Florida Health Plan, the  
231 employees and members of the Florida Health Board, the employees  
232 and members of the regional planning boards and the regional  
233 health planning directors, the employees and the director of the  
234 Florida Health Fund, the employees and the director of the  
235 Office of Health Quality and Planning, the employees and the  
236 ombudsman of the Ombudsman Office for Patient Advocacy, and the  
237 auditor for the Florida Health Plan. Failure to comply with the  
238 code of ethics under part III of chapter 112 is grounds for  
239 disciplinary action, which may include termination of employment  
240 or removal from the board.

241           **Section 9.** For the 2026-2027 fiscal year, an adequate sum  
242 is appropriated from the General Revenue Fund to the Florida  
243 Health Fund under the Florida Health Plan to provide startup  
244 funding for the provisions of this act and the immediate  
245 establishment of an exploratory staff to pursue the foundation  
246 of this act.

247           **Section 10.** This act shall take effect July 1, 2026, but  
248 only if HB 1489 or similar legislation is adopted in the same  
249 legislative session or an extension thereof and becomes a law.