A bill to be entitled An act relating to health care coverage mandates; repealing s. 627.419(3) and (4), F.S.; relating to construction of policies requiring payment to chiropractors and podiatrists for services provided within scope of practice; repealing s. 627.4236, F.S., relating to coverage for bone marrow transplant procedures; repealing s. 627.42395, F.S., relating to coverage for certain prescription and nonprescription enteral formulas; repealing s. 627.6403, F.S., relating to payment of acupuncture benefits to certified acupuncturists; repealing s. 627.6407, F.S., relating to payment of services provided by massage therapist; repealing s. 627.64193, F.S., relating to required coverage for cleft lip and cleft palate; repealing s. 627.6471(6), F.S., relating to mandated eligibility provision for participation in provider network by therapist, counselor, psychologist, or psychiatric nurse; repealing s. 627.6472(15), F.S., relating to mandated eligibility provision for participation in provider network by therapist, counselor, psychologist, or psychiatric nurse; repealing s. 627.6617, F.S., relating to coverage for home health care services; repealing s. 627.6618, F.S., relating to payment of acupuncture benefits to certified acupuncturists; repealing s. 627.6619, F.S., relating to payment of services provided by massage therapist; repealing s. 627.6686, F.S., relating to

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         coverage for individuals with autism spectrum
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         disorder; repealing s. 627.668, F.S., relating to
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         optional coverage for mental and nervous disorders;
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         repealing s. 627.669, F.S., relating to optional
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         coverage required for substance abuse impaired
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         persons; repealing s. 627.66911, F.S., relating to
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         required coverage for cleft lip and cleft palate;
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         repealing s. 641.31(24), (35) and (37), F.S., relating
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         to payment for treatment at an osteopathic hospital in
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         certain circumstances, required coverage for cleft lip
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         and cleft palate, and payment for services provided by
         massage therapist; repealing s. 641.31098, F.S.,
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         relating to coverage for individuals with
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         developmental disabilities; amending ss. 409.815,
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         F.S.; 409.906, F.S.; 624.916, F.S.; 627.6472, F.S.;
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         627.6515, F.S.; 627.6675, F.S.; 627.6699, F.S.;
         641.2018, F.S.; and 1002.66, F.S.; conforming cross-
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         references; providing an effective date.
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    Be It Enacted by the Legislature of the State of Florida:
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         Section 1.
                      Subsections (3) and (4) of section 627.419,
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    Florida Statutes, are repealed.
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         Section 2.
                      Section 627.4236, Florida Statutes, is
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    repealed.
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         Section 3.
                      Section 627.42395, Florida Statutes, is
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    repealed.
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         Section 4. Section 627.6403, Florida Statutes, is
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    repealed.
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ORIGINAL

57 Section 5. Section 627.6407, Florida Statutes, is 58 repealed. Section 6. Section 627.64193, Florida Statutes, is 59 60 repealed. Section 7. Subsection (6) of section 627.6471, Florida 61 62 Statutes, is repealed. Section 8. 63 Subsection (15) of section 627.6472, Florida 64 Statutes, is repealed. 65 Section 9. Section 627.6617, Florida Statutes, is 66 repealed. Section 10. Section 627.6618, Florida Statutes, is 67 68 repealed. Section 11. Section 627.6619, Florida Statutes, is 69 70 repealed. Section 12. Section 627.668, Florida Statutes, is 71 72 repealed. 73 Section 13. Section 627.6686, Florida Statutes, is 74 repealed. Section 14. Section 627.669, Florida Statutes, is 75 76 repealed. 77 Section 15. Section 627.66911, Florida Statutes, is 78 repealed. 79 Section 16. Subsections (24), (35), and (37) of section 80 641.31, Florida Statutes, are repealed. Section 17. Section 641.31098, Florida Statutes, is 81 82 repealed. 83 Section 18. Paragraph (e) of subsection (2) of section 84 409.815, Florida Statutes, is amended to read:

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CODING: Words stricken are deletions; words underlined are additions.

YEAR

409.815 Health benefits coverage; limitations.-

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(e) Organ transplantation services.—Covered services include pretransplant, transplant, and postdischarge services and treatment of complications after transplantation for transplants deemed necessary and appropriate within the guidelines set by the Organ Transplant Advisory Council under s. 765.53 or the Bone Marrow Transplant Advisory Panel under s. 627.4236.

Section 19. Subsection (26) of section 409.906, Florida Statutes, is amended to read:

409.906 Optional Medicaid services.-

HOME AND COMMUNITY-BASED SERVICES FOR AUTISM SPECTRUM DISORDER AND OTHER DEVELOPMENTAL DISABILITIES. - The agency is authorized to seek federal approval through a Medicaid waiver or a state plan amendment for the provision of occupational therapy, speech therapy, physical therapy, behavior analysis, and behavior assistant services to individuals who are 5 years of age and under and have a diagnosed developmental disability as defined in s. 393.063, autism spectrum disorder as defined in s. 627.6686, or Down syndrome, a genetic disorder caused by the presence of extra chromosomal material on chromosome 21. Causes of the syndrome may include Trisomy 21, Mosaicism, Robertsonian Translocation, and other duplications of a portion of chromosome 21. Coverage for such services shall be limited to \$36,000 annually and may not exceed \$108,000 in total lifetime benefits. The agency shall submit an annual report beginning on January 1, 2009, to the President of the Senate, the Speaker of the House

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of Representatives, and the relevant committees of the Senate and the House of Representatives regarding progress on obtaining federal approval and recommendations for the implementation of these home and community-based services. The agency may not implement this subsection without prior legislative approval.

Section 20. Paragraph (b) of subsection (6) and paragraph (c) of subsection (8) of section 624.916, Florida Statutes, is amended to read:

624.916 Developmental disabilities compact.-

- (6) Beginning February 15, 2009, and continuing annually thereafter, the Office of Insurance Regulation shall provide a report to the Governor, the President of the Senate, and the Speaker of the House of Representatives regarding the implementation of the agreement negotiated under this section. The report shall include:
- (b) An analysis of the coverage provided under the agreement in comparison to the coverage required under ss. 627.6686 and 641.31098.
- (8) As used in this section, the term "developmental disabilities" includes:
  - (c) Autism spectrum disorder, as defined in s. 627.6686.
- Section 21. Paragraph (c) of subsection (1) of section 627.6472, Florida Statutes, is amended to read:
  - 627.6472 Exclusive provider organizations.-
    - (1) As used in this section, the term:
  - (c) "Exclusive provider" means a provider of health care, or a group of providers of health care, that has entered into a written agreement with the insurer to provide benefits under a

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141	health insurance policy issued under this section, which
142	agreement shall include any health care provider listed in s.
143	627.419(3) and (4) and shall provide reasonable access to such
144	health care providers.

Section 22. Paragraph (c) of subsection (2) of section 627.6515, Florida Statutes, is amended to read:

627.6515 Out-of-state groups.-

- (2) Except as otherwise provided in this part, this part does not apply to a group health insurance policy issued or delivered outside this state under which a resident of this state is provided coverage if:
- (c) The policy provides the benefits specified in ss. 627.419, 627.6574, 627.6575, 627.6579, 627.6612, 627.66121, 627.66122, 627.6613, 627.667, 627.6675, and 627.6691, and 627.66911, and complies with the requirements of s. 627.66996.

Section 23. Subsection (8) of section 627.6675, Florida Statutes, is amended to read:

627.6675 Conversion on termination of eligibility.-

- (8) BENEFITS OFFERED.—
- (a) An insurer shall not be required to issue a converted policy that provides benefits in excess of those provided under the group policy from which conversion is made.
- (b) An insurer shall offer the benefits specified in s. 627.668 and the benefits specified in s. 627.669 if those benefits were provided in the group plan.
- (b) (c) An insurer shall offer maternity benefits and dental benefits if those benefits were provided in the group plan.

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Section 24. Paragraph (b) of subsection (12) of section 627.6699, Florida Statutes, is amended to read:

- 627.6699 Employee Health Care Access Act.-
- (12) STANDARD, BASIC, HIGH DEDUCTIBLE, AND LIMITED HEALTH BENEFIT PLANS.—
- (b) 7. Sections 627.419(2), (3), and (4), 627.6574, 627.6612, 627.66121, 627.66122, and 627.6616, 627.6618, 627.668, and 627.66911 apply to the standard health benefit plan and to the basic health benefit plan. However, notwithstanding said provisions, the plans may specify limits on the number of authorized treatments, if such limits are reasonable and do not discriminate against any type of provider.
- Section 25. Subsection (1) of section 641.2018, Florida Statutes, is amended to read:
- 641.2018 Limited coverage for home health care authorized.—
- (1) Notwithstanding other provisions of this chapter, a health maintenance organization may issue a contract that limits coverage to home health care services only. The organization and the contract shall be subject to all of the requirements of this part that do not require or otherwise apply to specific benefits other than home care services. To this extent, all of the requirements of this part apply to any organization or contract that limits coverage to home care services, except the requirements for providing comprehensive health care services as provided in ss. 641.19(4), (11), and (12), and 641.31(1), except ss. 641.31(9), (12), (17), (18), (19), (20), (21), and (24) and 641.31095.

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Section 26. Paragraph (a) of subsection (2) of section 1002.66, Florida Statutes, is amended, and subsequent paragraphs are renumbered, to read:

1002.66 Specialized instructional services for children with disabilities.—

- (2) The parent of a child who is eligible for the prekindergarten program for children with disabilities may select one or more specialized instructional services that are consistent with the child's individual educational plan. These specialized instructional services may include, but are not limited to:
- (a) Applied behavior analysis as defined in ss. 627.6686 and 641.31098.
- Section 27. This act shall take effect July 1, 2012.

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