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1                   A bill to be entitled  
2     An act relating to health insurance; creating s.  
3     627.64195, F.S.; requiring individual accident or health  
4     insurance policies to provide certain coverage for  
5     orthoses and prostheses and orthotics and prosthetics;  
6     providing requirements and limitations; specifying  
7     deductible and copayment requirements; authorizing  
8     insurers to specify certain benefits limitations;  
9     providing for nonapplication to certain policy coverages;  
10    creating s. 627.66915, F.S.; requiring group, blanket, or  
11    franchise accident or health insurance policies to provide  
12    coverage for orthoses and prostheses and orthotics and  
13    prosthetics; providing requirements and limitations;  
14    specifying deductible and copayment requirements;  
15    authorizing insurers to specify certain benefits  
16    limitations; providing for nonapplication to certain  
17    policy coverages; amending s. 641.31, F.S.; requiring  
18    health maintenance contracts to provide coverage for  
19    orthoses and prostheses and orthotics and prosthetics;  
20    providing requirements and limitations; specifying  
21    deductible and copayment requirements; authorizing health  
22    maintenance organizations to specify certain benefits  
23    limitations; providing for nonapplication to certain  
24    contract coverages; providing an effective date.

25  
26    Be It Enacted by the Legislature of the State of Florida:  
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28           Section 1. Section 627.64195, Florida Statutes, is created  
29 to read:

30           627.64195 Coverage for orthoses and prostheses and  
31 orthotics and prosthetics.—

32           (1)(a) Each accident or health insurance policy issued,  
33 amended, delivered, or renewed in this state on or after January  
34 1, 2012, that provides medical coverage that includes coverage  
35 for physician services in a physician's office and each accident  
36 or health insurance policy that provides major medical or  
37 similar comprehensive type coverage must provide coverage for  
38 benefits for orthoses and prostheses as defined in s. 468.80 and  
39 orthotics and prosthetics as defined in s. 468.80 that equal  
40 those benefits provided for under federal laws for health  
41 insurance for the aged and disabled pursuant to 42 U.S.C. ss.  
42 1395k, 1395l, and 1395m and 42 C.F.R. ss. 414.202, 414.210,  
43 414.228, and 410.100 as applicable to this section.

44           (b)1. The coverage is subject to the deductible and  
45 coinsurance provisions applicable to outpatient visits and is  
46 also subject to all other terms and conditions applicable to  
47 other benefits.

48           2. Every insurer subject to the requirements of this  
49 section shall make available to the policyholder as part of the  
50 application, for an appropriate additional premium, the coverage  
51 required in this section without such coverage being subject to  
52 the deductible or coinsurance provisions of the policy.

53           (2) An accident or health insurance policy may require  
54 prior authorization for orthoses and prostheses and orthotics  
55 and prosthetics in the same manner that prior authorization is

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56 required for any other covered benefit.

57 (3) (a) Covered benefits for orthoses or prostheses shall  
58 be limited to the most appropriate model that adequately meets  
59 the medical needs of the patient as determined by the insured's  
60 treating physician.

61 (b) The repair and replacement of orthoses or prostheses  
62 also shall be covered subject to copayments and deductibles,  
63 unless necessitated by misuse or loss.

64 (4) An insurer may require, if coverage is provided  
65 through a managed care plan, that benefits mandated pursuant to  
66 this section be covered benefits only if the orthoses or  
67 prostheses are provided by a vendor and orthotics or prosthetics  
68 are rendered by an orthotist or prosthetist as defined in s.  
69 468.80.

70 (5) This section does not apply to insurance coverage  
71 providing benefits for hospital confinement indemnity,  
72 disability income, accident only, long-term care, Medicare  
73 supplement, limited benefit health, specified disease indemnity,  
74 sickness or bodily injury or death by accident or both, and  
75 other limited benefit policies.

76 Section 2. Section 627.66915, Florida Statutes, is created  
77 to read:

78 627.66915 Coverage for orthoses and prostheses and  
79 orthotics and prosthetics.—

80 (1) (a) Each group, blanket, or franchise accident or  
81 health insurance policy issued, amended, delivered, or renewed  
82 in this state on or after January 1, 2012, that provides medical  
83 coverage that includes coverage for physician services in a

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84 physician's office and each such policy that provides major  
85 medical or similar comprehensive type coverage must provide  
86 coverage for benefits for orthoses and prostheses as defined in  
87 s. 468.80 and orthotics and prosthetics as defined in s. 468.80  
88 that equal those benefits provided for under federal laws for  
89 health insurance for the aged and disabled pursuant to 42 U.S.C.  
90 ss. 1395k, 1395l, and 1395m and 42 C.F.R. ss. 414.202, 414.210,  
91 414.228, and 410.100 as applicable to this section.

92 (b)1. The coverage is subject to the deductible and  
93 coinsurance provisions applicable to outpatient visits and is  
94 also subject to all other terms and conditions applicable to  
95 other benefits.

96 2. Every insurer subject to the requirements of this  
97 section shall make available to the policyholder as part of the  
98 application, for an appropriate additional premium, the coverage  
99 required in this section without such coverage being subject to  
100 the deductible or coinsurance provisions of the policy.

101 (2) A group, blanket, or franchise accident or health  
102 insurance policy may require prior authorization for orthoses  
103 and prostheses and orthotics and prosthetics in the same manner  
104 that prior authorization is required for any other covered  
105 benefit.

106 (3) (a) Covered benefits for orthoses or prostheses shall  
107 be limited to the most appropriate model that adequately meets  
108 the medical needs of the patient as determined by the insured's  
109 treating physician.

110 (b) The repair and replacement of orthoses or prostheses  
111 also shall be covered subject to copayments and deductibles,

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unless necessitated by misuse or loss.

(4) An insurer may require, if coverage is provided through a managed care plan, that benefits mandated pursuant to this section be covered benefits only if the orthoses or prostheses are provided by a vendor and orthotics or prosthetics are rendered by an orthotist or prosthetist as defined in s. 468.80.

(5) This section does not apply to insurance coverage providing benefits for hospital confinement indemnity, disability income, accident only, long-term care, Medicare supplement, limited benefit health, specified disease indemnity, sickness or bodily injury or death by accident or both, and other limited benefit policies.

Section 3. Subsection (44) is added to section 641.31, Florida Statutes, to read:

641.31 Health maintenance contracts.—

(44) (a) Each health maintenance contract issued, amended, delivered, or renewed in this state on or after January 1, 2012, that provides medical coverage that includes coverage for physician services in a physician's office and each contract, plan, or policy that provides major medical or similar comprehensive type coverage must provide coverage for benefits for orthoses and prostheses as defined in s. 468.80 and orthotics and prosthetics as defined in s. 468.80 that equal those benefits provided for under federal laws for health insurance for the aged and disabled pursuant to 42 U.S.C. ss. 1395k, 1395l, and 1395m and 42 C.F.R. ss. 414.202, 414.210, 414.228, and 410.100 as applicable to this subsection.

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140       (b)1. The coverage is subject to the deductible and  
141 coinsurance provisions applicable to outpatient visits and is  
142 also subject to all other terms and conditions applicable to  
143 other benefits.

144       2. Every health maintenance organization subject to the  
145 requirements of this subsection shall make available to the  
146 subscriber as part of the application, for an appropriate  
147 additional premium, the coverage required in this subsection  
148 without such coverage being subject to the deductible or  
149 coinsurance provisions of the contract.

150       (c) A health maintenance contract may require prior  
151 authorization for orthoses and prostheses and orthotics and  
152 prosthetics in the same manner that prior authorization is  
153 required for any other covered benefit.

154       (d)1. Covered benefits for orthoses or prostheses shall be  
155 limited to the most appropriate model that adequately meets the  
156 medical needs of the patient as determined by the insured's  
157 treating physician.

158       2. The repair and replacement of orthoses or prostheses  
159 also shall be covered subject to copayments and deductibles,  
160 unless necessitated by misuse or loss.

161       (e) A health maintenance contract may require that  
162 benefits mandated pursuant to this subsection be covered  
163 benefits only if the orthoses or prostheses are provided by a  
164 vendor and orthotics or prosthetics are rendered by a orthotist  
165 or prosthetist as defined in s. 468.80.

166       (f) This subsection does not apply to insurance coverage  
167 providing benefits for hospital confinement indemnity,

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168 disability income, accident only, long-term care, Medicare  
169 supplement, limited benefit health, specified disease indemnity,  
170 sickness or bodily injury or death by accident or both, and  
171 other limited benefit policies.

172       Section 4. This act shall take effect July 1, 2011.