First Engrossed

201486e1

| 1  | A bill to be entitled  |
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| 2  | An act relating to dentists; amending s. 627.6474,                               |
| 3  | F.S.; prohibiting a contract between a health insurer                            |
| 4  | and a dentist from requiring the dentist to provide                              |
| 5  | services at a fee set by the insurer under certain                               |
| 6  | circumstances; defining the term "covered services" as                           |
| 7  | it relates to contracts between a health insurer and a                           |
| 8  | dentist; amending s. 636.035, F.S.; prohibiting a                                |
| 9  | contract between a prepaid limited health service                                |
| 10 | organization and a dentist from requiring the dentist                            |
| 11 | to provide services at a fee set by the organization                             |
| 12 | under certain circumstances; defining the term                                   |
| 13 | "covered services" as it relates to contracts between                            |
| 14 | a prepaid limited health service organization and a                              |
| 15 | dentist; amending s. 641.315, F.S.; prohibiting a                                |
| 16 | contract between a health maintenance organization and                           |
| 17 | a dentist from requiring the dentist to provide                                  |
| 18 | services at a fee set by the organization under                                  |
| 19 | certain circumstances; defining the term "covered                                |
| 20 | services" as it relates to contracts between a health                            |
| 21 | maintenance organization and a dentist; providing                                |
| 22 | applicability; providing an effective date.                                      |
| 23 |  |
| 24 | Be It Enacted by the Legislature of the State of Florida:                        |
| 25 |  |
| 26 | Section 1. Section 627.6474, Florida Statutes, is amended                        |
| 27 | to read:   |
| 28 | 627.6474 Provider contracts  |
| 29 | <u>(1)</u> A health insurer <u>may</u> <del>shall</del> not require a contracted |
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30 health care practitioner as defined in s. 456.001(4) to accept 31 the terms of other health care practitioner contracts with the 32 insurer or any other insurer, or health maintenance organization, under common management and control with the 33 34 insurer, including Medicare and Medicaid practitioner contracts 35 and those authorized by s. 627.6471, s. 627.6472, s. 636.035, or 36 s. 641.315, except for a practitioner in a group practice as 37 defined in s. 456.053 who must accept the terms of a contract 38 negotiated for the practitioner by the group, as a condition of 39 continuation or renewal of the contract. Any contract provision 40 that violates this section is void. A violation of this 41 subsection section is not subject to the criminal penalty 42 specified in s. 624.15. 43 (2) A contract between a health insurer and a dentist licensed under chapter 466 for the provision of services to an

44 45 insured may not contain a provision that requires the dentist to 46 provide services to the insured under such contract at a fee set 47 by the health insurer unless such services are covered services under the applicable contract. As used in this paragraph, the 48 49 term "covered services" means dental care services for which a 50 reimbursement is available under the insured's contract, or for 51 which a reimbursement would be available but for the application 52 of contractual limitations such as deductibles, coinsurance, 53 waiting periods, annual or lifetime maximums, frequency 54 limitations, alternative benefit payments, or any other 55 limitation. 56 Section 2. Subsection (13) is added to section 636.035, 57 Florida Statutes, to read:

636.035 Provider arrangements.-

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| 59 | (13) A contract between a prepaid limited health service         |
| 60 | organization and a dentist licensed under chapter 466 for the    |
| 61 | provision of services to a subscriber of the prepaid limited     |
| 62 | health service organization may not contain a provision that     |
| 63 | requires the dentist to provide services to the subscriber of    |
| 64 | the prepaid limited health service organization at a fee set by  |
| 65 | the prepaid limited health service organization unless such      |
| 66 | services are covered services under the applicable contract. As  |
| 67 | used in this paragraph, the term "covered services" means dental |
| 68 | care services for which a reimbursement is available under the   |
| 69 | subscriber's contract, or for which a reimbursement would be     |
| 70 | available but for the application of contractual limitations     |
| 71 | such as deductibles, coinsurance, waiting periods, annual or     |
| 72 | lifetime maximums, frequency limitations, alternative benefit    |
| 73 | payments, or any other limitation.                               |
| 74 | Section 3. Subsection (11) is added to section 641.315,          |
| 75 | Florida Statutes, to read:                                       |
| 76 | 641.315 Provider contracts                                       |
| 77 | (11) A contract between a health maintenance organization        |
| 78 | and a dentist licensed under chapter 466 for the provision of    |
| 79 | services to a subscriber of the health maintenance organization  |
| 80 | may not contain a provision that requires the dentist to provide |
| 81 | services to the subscriber of the health maintenance             |
| 82 | organization at a fee set by the health maintenance organization |
| 83 | unless such services are covered services under the applicable   |
| 84 | contract. As used in this paragraph, the term "covered services" |
| 85 | means dental care services for which a reimbursement is          |
| 86 | available under the subscriber's contract, or for which a        |
| 87 | reimbursement would be available but for the application of      |

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| 88 | contractual limitations such as deductibles, coinsurance, |
|----|---|
| 89 | waiting periods, annual or lifetime maximums, frequency   |
| 90 | limitations, alternative benefit payments, or any other   |
| 91 | limitation.   |
| 92 | Section 4. This act applies to contracts entered into or  |
| 93 | renewed on or after July 1, 2014.                         |
| 94 | Section 5. This act shall take effect July 1, 2014.       |
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