House



LEGISLATIVE ACTION .

Senate Floor: WD 04/28/2015 02:06 PM

Senator Latvala moved the following: Senate Amendment (with title amendment) 1 3 Between lines 594 and 595 4 insert: 5 Section 18. Effective January 1, 2016, subsection (3) is 6 added to section 627.6474, Florida Statutes, to read: 7 627.6474 Provider contracts.-(3) (a) A health insurer may not require an ophthalmologist 9 licensed pursuant to chapter 458 or chapter 459 or an 10 optometrist licensed pursuant to chapter 463 to join a network solely for the purpose of credentialing the licensee for another 11

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12	insurer's vision network. This paragraph does not prevent a
13	health insurer from entering into a contract with another
14	insurer's vision care plan to use the vision network.
15	(b) A health insurer may not restrict or limit an
16	ophthalmologist licensed pursuant to chapter 458 or chapter 459,
17	an optometrist licensed pursuant to chapter 463, or an optician
18	licensed pursuant to part I of chapter 484 to specific suppliers
19	of materials or optical laboratories. This paragraph does not
20	restrict or limit a health insurer in determining specific
21	amounts of coverage or reimbursement for the use of network or
22	out-of-network suppliers or laboratories.
23	(c) A health insurer's online vision care network provider
24	directory must be updated monthly to reflect the vision care
25	providers currently participating in the health insurer's
26	network.
27	(d) A knowing violation of paragraph (a) or paragraph (b)
28	constitutes an unfair insurance trade practice under s.
29	<u>626.9541(1)(d).</u>
30	Section 19. Effective January 1, 2016, subsection (14) is
31	added to section 636.035, Florida Statutes, to read:
32	636.035 Provider arrangements.—
33	(14)(a) A prepaid limited health service organization may
34	not require an ophthalmologist licensed pursuant to chapter 458
35	or chapter 459 or an optometrist licensed pursuant to chapter
36	463 to join a network solely for the purpose of credentialing
37	the licensee for another organization's vision network. This
38	paragraph does not prevent such organization from entering into
39	a contract with another organization's vision care plan to use
40	the vision network.

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41	(b) A prepaid limited health service organization may not
42	restrict or limit an ophthalmologist licensed pursuant to
43	chapter 458 or chapter 459, an optometrist licensed pursuant to
44	chapter 463, or an optician licensed pursuant to part I of
45	chapter 484 to specific suppliers of materials or optical
46	laboratories. This paragraph does not restrict or limit such
47	organization in determining specific amounts of coverage or
48	reimbursement for the use of network or out-of-network suppliers
49	or laboratories.
50	(c) A prepaid limited health service organization's online
51	vision care network provider directory must be updated monthly
52	to reflect the vision care providers currently participating in
53	the organization's network.
54	(d) A knowing violation of paragraph (a) or paragraph (b)
55	constitutes an unfair insurance trade practice under s.
56	<u>626.9541(1)(d).</u>
57	Section 20. Effective January 1, 2016, subsection (12) is
58	added to section 641.315, Florida Statutes, to read:
59	641.315 Provider contracts.—
60	(12)(a) A health maintenance organization may not require
61	an ophthalmologist licensed pursuant to chapter 458 or chapter
62	459 or an optometrist licensed pursuant to chapter 463 to join a
63	network solely for the purpose of credentialing the licensee for
64	another organization's vision network. This paragraph does not
65	prevent such organization from entering into a contract with
66	another organization's vision care plan to use the vision
67	network.
68	(b) A health maintenance organization may not restrict or
69	limit an ophthalmologist licensed pursuant to chapter 458 or

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70	chapter 459, an optometrist licensed pursuant to chapter 463, or
71	an optician licensed pursuant to part I of chapter 484 to
72	specific suppliers of materials or optical laboratories. This
73	paragraph does not restrict or limit such organization in
74	determining specific amounts of coverage or reimbursement for
75	the use of network or out-of-network suppliers or laboratories.
76	(c) A health maintenance organization's online vision care
77	network provider directory must be updated monthly to reflect
78	the vision care providers currently participating in the
79	organization's network.
80	(d) A knowing violation of paragraph (a) or paragraph (b)
81	constitutes an unfair insurance trade practice under s.
82	<u>626.9541(1)(d).</u>
83	Section 21. Except as otherwise expressly provided in this
84	act, this act shall take effect July 1, 2015.
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86	=========== T I T L E A M E N D M E N T =================================
87	And the title is amended as follows:
88	Delete line 83
89	and insert:
90	amending ss. 627.6474, 636.035, and 641.315, F.S.;
91	providing that a health insurer, a prepaid limited
92	health service organization, and a health maintenance
93	organization, respectively, may not require a licensed
94	ophthalmologist or optometrist to join a network
95	solely for the purpose of credentialing the licensee
96	for another vision network; providing that such
97	insurers and organizations are not prevented by the
98	act from entering into a contract with another vision

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99 care plan; providing that such insurers and 100 organizations may not restrict or limit a licensed 101 ophthalmologist, optometrist, or optician to specific 102 suppliers of materials or optical laboratories; 103 providing that such insurers and organizations are not 104 restricted or limited by the act in determining 105 certain amounts of coverage or reimbursement; requiring such insurers' and organizations' online 106 vision care network provider directories to be updated 107 108 monthly; providing that a violation of certain 109 prohibitions in the act constitutes a specified unfair 110 insurance trade practice; providing effective dates.

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