

By Senator Rodriguez

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1 A bill to be entitled
2 An act relating to dependent elderly parent coverage;
3 amending s. 627.602, F.S.; providing applicability of
4 a dependent elderly parent coverage provision to
5 health insurance policies under part VI of ch. 627,
6 F.S.; amending s. 627.6562, F.S.; requiring, subject
7 to certain conditions, a group, blanket, or franchise
8 health insurance policy that insures elderly parents
9 of the policyholder or certificateholder to insure a
10 dependent elderly parent of the policyholder or
11 certificateholder if the parent is of at least a
12 specified age; reenacting s. 641.31(41), F.S.,
13 relating to health maintenance contracts, to
14 incorporate the amendment made to s. 627.6562, F.S.,
15 in a reference thereto; providing an effective date.
16

17 Be It Enacted by the Legislature of the State of Florida:
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19 Section 1. Paragraph (c) of subsection (1) of section
20 627.602, Florida Statutes, is amended to read:

21 627.602 Scope, format of policy.—

22 (1) Each health insurance policy delivered or issued for
23 delivery to any person in this state must comply with all
24 applicable provisions of this code and all of the following
25 requirements:

26 (c) The policy may purport to insure only one person,
27 except that upon the application of an adult member of a family,
28 who is deemed to be the policyholder, a policy may insure,
29 either originally or by subsequent amendment, any eligible

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30 members of that family, including husband, wife, child, elderly
31 parent, any children or any other person dependent upon the
32 policyholder. If an insurer offers coverage for dependent
33 children or dependent elderly parents of the policyholder, such
34 policy must comply with ~~the provisions of~~ s. 627.6562.

35 Section 2. Section 627.6562, Florida Statutes, is amended
36 to read:

37 627.6562 Coverage of dependent children and dependent
38 elderly parents ~~Dependent coverage.~~-

39 (1) If an insurer offers coverage under a group, blanket,
40 or franchise health insurance policy that insures dependent
41 children of the policyholder or certificateholder, the policy
42 must insure a dependent child of the policyholder or
43 certificateholder at least until the end of the calendar year in
44 which the child reaches the age of 25, if the child meets all of
45 the following:

46 (a) The child is dependent upon the policyholder or
47 certificateholder for support.

48 (b) The child is living in the household of the
49 policyholder or certificateholder, or the child is a full-time
50 or part-time student.

51 (2) A policy that is subject to the requirements of
52 subsection (1) must also offer the policyholder or
53 certificateholder the option to insure a child of the
54 policyholder or certificateholder at least until the end of the
55 calendar year in which the child reaches the age of 30, if the
56 child:

57 (a) Is unmarried and does not have a dependent of his or
58 her own;

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59 (b) Is a resident of this state or a full-time or part-time
60 student; and

61 (c) Is not provided coverage as a named subscriber,
62 insured, enrollee, or covered person under any other group,
63 blanket, or franchise health insurance policy or individual
64 health benefits plan, or is not entitled to benefits under Title
65 XVIII of the Social Security Act.

66 (3) If, pursuant to subsection (2), a child is provided
67 coverage under the parent's policy after the end of the calendar
68 year in which the child reaches age 25 and coverage for the
69 child is subsequently terminated, the child is not eligible to
70 be covered under the parent's policy unless the child was
71 continuously covered by other creditable coverage without a gap
72 in coverage of more than 63 days.

73 (a) For the purposes of this subsection, the term
74 "creditable coverage" means, with respect to an individual,
75 coverage of the individual under any of the following:

76 1. A group health plan, as defined in s. 2791 of the Public
77 Health Service Act.

78 2. Health insurance coverage consisting of medical care
79 provided directly through insurance or reimbursement or
80 otherwise, and including terms and services paid for as medical
81 care, under any hospital or medical service policy or
82 certificate, hospital or medical service plan contract, or
83 health maintenance contract offered by a health insurance
84 issuer.

85 3. Part A or Part B of Title XVIII of the Social Security
86 Act.

87 4. Title XIX of the Social Security Act, other than

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88 coverage consisting solely of benefits under s. 1928.

89 5. Title 10 U.S.C. chapter 55.

90 6. A medical care program of the Indian Health Service or
91 of a tribal organization.

92 7. A state health benefit risk pool.

93 8. A health plan offered under 5 U.S.C. chapter 89.

94 9. A public health plan as defined by rules adopted by the
95 commission. To the greatest extent possible, such rules must be
96 consistent with regulations adopted by the United States
97 Department of Health and Human Services.

98 10. A health benefit plan under s. 5(e) of the Peace Corps
99 Act, 22 U.S.C. s. 2504(e).

100 (b) Creditable coverage does not include coverage that
101 consists of one or more, or any combination thereof, of the
102 following excepted benefits:

103 1. Coverage only for accident insurance, or disability
104 income insurance, or any combination thereof.

105 2. Coverage issued as a supplement to liability insurance.

106 3. Liability insurance, including general liability
107 insurance and automobile liability insurance.

108 4. Workers' compensation or similar insurance.

109 5. Automobile medical payment insurance.

110 6. Credit-only insurance.

111 7. Coverage for onsite medical clinics, including prepaid
112 health clinics under part II of chapter 641.

113 8. Other similar insurance coverage specified in rules
114 adopted by the commission under which benefits for medical care
115 are secondary or incidental to other insurance benefits. To the
116 extent possible, such rules must be consistent with regulations

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117 adopted by the United States Department of Health and Human
118 Services.

119 (c) The following benefits are not subject to the
120 creditable coverage requirements, if offered separately:

- 121 1. Limited scope dental or vision benefits.
- 122 2. Benefits for long-term care, nursing home care, home
123 health care, community-based care, or any combination thereof.
- 124 3. Other similar, limited benefits specified in rules
125 adopted by the commission.

126 (d) The following benefits are not subject to creditable
127 coverage requirements if offered as independent, noncoordinated
128 benefits:

- 129 1. Coverage only for a specified disease or illness.
- 130 2. Hospital indemnity or other fixed indemnity insurance.

131 (e) Benefits provided through a Medicare supplemental
132 health insurance policy, as defined under s. 1882(g)(1) of the
133 Social Security Act, coverage supplemental to the coverage
134 provided under 10 U.S.C. chapter 55, and similar supplemental
135 coverage provided to coverage under a group health plan are not
136 considered creditable coverage if offered as a separate
137 insurance policy.

138 (4) If an insurer offers coverage under a group, blanket,
139 or franchise health insurance policy that insures elderly
140 parents of the policyholder or certificateholder, the policy
141 must insure a dependent elderly parent of the policyholder or
142 certificateholder if the parent is 60 years of age or older.

143 (5)~~(4)~~ This section does not:

144 (a) Affect or preempt an insurer's right to medically
145 underwrite or charge the appropriate premium;

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146 (b) Require coverage for services provided to a dependent
147 before October 1, 2008;

148 (c) Require an employer to pay all or part of the cost of
149 coverage provided for a dependent under this section; or

150 (d) Prohibit an insurer or health maintenance organization
151 from increasing the limiting age for dependent coverage to age
152 30 in policies or contracts issued or renewed prior to the
153 effective date of this act.

154 (e) ~~(5) This section does not~~ Apply to accident only,
155 specified disease, disability income, Medicare supplement, or
156 long-term care insurance policies.

157 Section 3. For the purpose of incorporating the amendment
158 made by this act to section 627.6562, Florida Statutes, in a
159 reference thereto, subsection (41) of section 641.31, Florida
160 Statutes, is reenacted to read:

161 641.31 Health maintenance contracts.—

162 (41) All health maintenance contracts providing coverage
163 for a member of the subscriber's family must comply with the
164 provisions of s. 627.6562.

165 Section 4. This act shall take effect July 1, 2018.