

THE FLORIDA SENATE
2017 SUMMARY OF LEGISLATION PASSED

Committee on Appropriations

SB 2508 — Division of State Group Insurance

by Appropriations Committee

The bill permits the Department of Management Services (department) to contract with a vendor to conduct a dependent eligibility verification audit. The department is required to put all enrollees of the State Group Health Insurance Plan on notice regarding the eligibility requirements for dependents. Through the next open enrollment period for the plan, enrollees can remove dependents who are no longer eligible for coverage. Beginning in December 2017, a contractor will begin the eligibility audits, requesting and reviewing documents on each dependent to ensure eligibility requirements have been met. The documents submitted for this audit must be retained until June 30, 2019. After that date, the documents are no longer useful and may be destroyed.

The bill also updates the current statutory provisions relating to the State Employees Prescription Drug Program. The current copayment structure is codified so that it does not revert to the December 31, 2010, copayment levels each year. The current copayments of \$7 for generic drugs, \$30 for preferred brand name drugs, and \$50 for nonpreferred brand name drugs continue, rather than reverting to \$10 for generic drugs, \$25 for preferred brand name drugs, and \$40 for nonpreferred brand name drugs.

The fiscal impact of this bill is indeterminate. However, the department anticipates that significant costs may be avoided by eliminating ineligible dependents.

If approved by the Governor, these provisions take effect July 1, 2017.

Vote: Senate 37-0; House 110-2