By the Committee on Banking and Insurance; and Senators Latvala, Campbell, Gutman, Silver, Meek and Mitchell

311-1797-99

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1 A bill to be entitled An act relating to health care; amending s. 2 3 641.3903, F.S.; providing that certain actions 4 by a health maintenance organization against a 5 provider based on the provider's communication 6 of certain information to a patient are unfair 7 or deceptive practices; amending s. 641.315, F.S.; requiring certain written notice in order 8 9 to terminate certain provider contracts; providing limitations on the use of such 10 notice; amending s. 641.51, F.S.; providing for 11 12 continued care of subscribers when certain provider contracts are terminated; providing 13 for applicability of the act; providing an 14 effective date. 15 16 17 Be It Enacted by the Legislature of the State of Florida: 18 19 Section 1. Subsection (14) is added to section 20 641.3903, Florida Statutes, to read: 641.3903 Unfair methods of competition and unfair or 21 22 deceptive acts or practices defined .-- The following are defined as unfair methods of competition and unfair or 23 deceptive acts or practices: 24 25 (14) ADVERSE ACTION AGAINST A PROVIDER. -- Any 26 retaliatory action by a health maintenance organization 27 against a contracted provider, including, but not limited to, 2.8 termination of a contract with the provider, on the basis that 29 the provider communicated information to the provider's 30 patient regarding medical care or treatment options for the

patient when the provider deems knowledge of such information by the patient to be in the best interest of the patient.

Section 2. Subsection (9) is added to section 641.315, Florida Statutes, to read:

641.315 Provider contracts.--

(9) A health maintenance organization or health care provider may not terminate a contract with a health care provider or health maintenance organization unless the party terminating the contract provides the terminated party with a written reason for the contract termination, which may include termination for business reasons of the terminating party. The reason provided in the notice required in this section or any other information relating to the reason for termination does not create any new administrative or civil action and may not be used as substantive evidence in any such action, but may be used for impeachment purposes. As used in this subsection, the term "health care provider" means any physicians licensed under ch. 458, ch. 459, ch. 460, ch. 461, or ch. 466.

Section 3. Subsection (7) of section 641.51, Florida Statutes, is amended to read:

- 641.51 Quality assurance program; second medical opinion requirement.--
- treating provider is terminated for any reason other than for cause, each party Each organization shall allow subscribers for whom treatment was active to continue coverage and care when medically necessary, through completion of treatment of a condition for which the subscriber was receiving care at the time of the termination, until the subscriber selects another treating provider, or during the next open enrollment period offered by the organization, whichever is longer, but not

longer than 6 months after termination of the contract. for 60 days with a terminated treating provider when medically 2 3 necessary, provided the subscriber has a life-threatening condition or a disabling and degenerative condition. Each 4 5 party to the terminated contract organization shall allow a 6 subscriber who has initiated a course of prenatal care, 7 regardless of is in the third trimester in which care was 8 initiated, of pregnancy to continue care and coverage with a 9 terminated treating provider until completion of postpartum 10 care. This does not prevent a provider from refusing to 11 continue to provide care to a subscriber who is abusive, noncompliant, or in arrears in payments for services provided. 12 For care continued under this subsection, the organization and 13 14 the provider shall continue to be bound by the terms of the terminated contract for such continued care. This subsection 15 shall not apply to treating providers who have been terminated 16 17 by the organization for cause. Changes made within 30 days after termination of a contract are effective only if agreed 18 19 to by both parties. 20 Section 4. This act shall take effect upon becoming a 21 law and shall apply only to contracts entered into after the effective date. 22

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1	STATEMENT OF SUBSTANTIAL CHANGES CONTAINED IN
2	COMMITTEE SUBSTITUTE FOR Senate Bill 232
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4	Deletes provisions that would have required managed care
5	organizations to provide an opportunity for a hearing to a health care provider prior to termination of the health care
6	provider's contract.
7	Amends s. 641.315, F.S., to prohibit a health maintenance organization (HMO) or health care provider from terminating a contract with a health care provider or HMO without providing
8	the terminated party with a written reason for the contract
9	termination. Such notice may not be used as substantive evidence in a subsequent action relating to the termination.
10	Amends s. 641.51, F.S., to require that HMOs and treating
11	health care providers continue care for subscribers when a contract between a HMO and a treating provider is terminated by either party for any reason other than for cause, for a
12	certain time period, and subject to certain exceptions.
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