Amendment No. 5

COMMITTEE/SUBCOMMITTEE	ACTION
ADOPTED	(Y/N)
ADOPTED AS AMENDED	(Y/N)
ADOPTED W/O OBJECTION	(Y/N)
FAILED TO ADOPT	(Y/N)
WITHDRAWN	(Y/N)
OTHER	

Committee/Subcommittee hearing bill: Insurance & Banking Subcommittee

Representative Fischer offered the following:

4 5

6

7

8

9

10

11

12

13

14

15

16

3

1 2

Amendment (with title amendment)

Remove lines 402-528 and insert:

Section 7. Subsection (7) is added to section 631.816, Florida Statutes, to read:

631.816 Board of directors.-

(7) Subject to the approval of the department, the board shall designate one representative to serve as a member of the board of directors of the Florida Life and Health Insurance Guaranty Association pursuant to s. 631.716(1). The representative, or his or her alternate, has the right to be present during all meetings of the association board of directors and shall have full voting rights.

654309 - h0673-line 402 2.docx

Section 8. Present subsections (2) through (6) of section
631.818, Florida Statutes, are renumbered as subsections (3)
through (7), respectively, a new subsection (2) is added to that
section, present subsection (4) is amended, present paragraph
(f) of present subsection (6) is redesignated as paragraph (g),
and a new paragraph (f) is added to that subsection, to read:

- 631.818 Powers and duties of the plan.-
- (2) In the event of a long-term care insurer impairment or insolvency, pursuant to s. 631.819(2)(c), the plan shall:
- (a) Collect and transmit all information requested by the Florida Life and Health Insurance Guaranty Association for the association to determine the appropriate assessment base of the health insurance account pursuant to ss. 631.715(2)(a)1. and 631.718(3)(b).
 - (b) Levy and collect assessments from HMOs.
- (c) Coordinate the administration and collection of member HMO assessments for long-term care insurer impairments and insolvencies with the Florida Life and Health Insurance Guaranty Association.
- (5) (4) The plan may render assistance and advice to the department, at the department's request, concerning rehabilitation, payment of claims, continuance of coverage, or the performance of other contractual obligations of any HMO subject to a delinquency proceeding or a proceeding under s. 624.90.

654309 - h0673-line 402 2.docx

- $(7) \frac{(6)}{(6)}$ The plan may:
- (f) In the event of a long-term care insurer impairment or insolvency, coordinate with the Florida Life and Health

 Insurance Guaranty Association to carry out the responsibilities of the association for the limited purpose of the long-term care insurer impairment or insolvency, including the development of any plan for handling the administration of the impairment or insolvency.
- Section 9. Subsections (1) and (3) of section 631.819, Florida Statutes, are amended, paragraph (c) is added to subsection (2), and subsection (6) is added to that section, to read:

631.819 Assessments.-

- (1) For the purposes of providing the funds necessary to carry out the powers and duties of the plan, the board of directors shall assess the member HMOs at such time and for such amounts as the board finds necessary. Assessments shall be due not less than 30 days after written notice to the member HMOs insurers.
- (2) Assessments for funds to meet the requirements of the plan with respect to an insolvent HMO shall not be made until necessary to implement the purposes of this part. In order to carry out its duties and powers under this part, upon the insolvency of an HMO, the plan shall levy and collect assessments as follows:

654309 - h0673-line 402 2.docx

(c) For the purposes of long-term care insurer impairment
and insolvency assessments under s. 631.718(3)(b), member HMOs
must be assessed in the same manner as member insurers of the
Florida Life and Health Insurance Guaranty Association under
part III of this chapter. Long-term care insurer impairment and
insolvency assessments must be levied and collected by the plan
pursuant to this part, deposited into the health insurance
account established under s. 631.715, and used solely for long-
term care insurer impairment or insolvency obligations.
Assessments collected from member HMOs are considered part of
and satisfy the obligations of the health insurance account
under ss. 631.715(2)(a)1. and 631.718(3)(b).

- insurer impairment and insolvency assessments, must shall be levied as a percentage of annual earned premium revenue for non-Medicare and non-Medicaid contracts. In no event may the plan assess in any calendar year more than 0.5 percent of each HMO's annual earned premium revenue for non-Medicaid contracts.
- department, a certificate of contribution to each member HMO paying a long-term care insurer impairment or insolvency assessment under this part for the amount of the assessment so paid. All outstanding certificates are of equal dignity and priority without reference to amounts or dates of issue. A

654309 - h0673-line 402 2.docx

certificate of contribution may be shown by the member HMO in its financial statement as an asset in such form and for such amount and period of time as the office approves. However, any amount offset pursuant to s. 631.828 may not be shown as an asset of the member HMO on any of its financial statements.

Section 10. Paragraph (f) of subsection (3) and paragraph (a) of subsection (4) of section 631.820, Florida Statutes, are amended to read:

631.820 Plan of operation.-

- (3) The plan of operation shall, in addition to requirements enumerated elsewhere in this part:
- (f) Establish any additional procedures for assessments under this part, including procedures to coordinate the administration and collection of member HMO assessments for long-term care insurer impairments and insolvencies with the board of directors of the Florida Life and Health Insurance Guaranty Association.
- (4) (a) The plan of operation may provide that any or all powers and duties of the plan, except those under <u>ss.</u>

 631.818(7)(b) and (c) and 631.819 <u>ss.</u> 631.818(6)(b) and (c) and 631.819, are delegated to an administrator that which may be a corporation, association, or other organization that which performs or will perform functions similar to those of this plan, or its equivalent.

654309 - h0673-line 402 2.docx

Amendment No. 5

116	Section 11. Subsection (2) of section 631.821, Florida
117	Statutes, is amended to read:
118	631.821 Powers and duties of the department
119	(2) Any action of the board of directors of the plan may
120	be appealed to the office by any member HMO if such appeal is
121	taken within 21 days of the action being appealed; however, the
122	HMO must comply with such action pending exhaustion of appeal
123	under s. 631.818(2). Any appeal shall be promptly determined by
124	the office, and final action or order of the office shall be
125	subject to judicial review in a court of competent jurisdiction.
126	Section 12. The amendments made to sections 631.713,
127	631.714, 631.717, 631,718, 631.721, 631.818, 631.819, and
128	631.820, Florida Statutes, by this act apply only to long-term
129	care assessment obligations assessed as a result of an insurer
130	being adjudged insolvent by a court of competent jurisdiction or
131	being determined by the office to be impaired on or after the
132	effective date of this act.
133	
134	
135	TITLE AMENDMENT
136	Remove lines 42-59 and insert:
137	insolvencies; conforming a cross-reference; amending
138	s. 631.816, F.S.; adding duties of the board of
139	directors of the Florida Health Maintenance
140	Organization Consumer Assistance Plan to conform to

654309 - h0673-line 402_2.docx

COMMITTEE/SUBCOMMITTEE AMENDMENT Bill No. HB 673 (2019)

Amendment No. 5

changes made by the act; amending s. 631.818, F.S.;
adding to the duties of the plan to conform to changes
made by the act; amending s. 631.819, F.S.; specifying
requirements for long-term care insurer impairment and
insolvency assessments for member health maintenance
organizations; requiring the plan to issue
certificates of contribution to member health
maintenance organizations paying certain assessments;
specifying requirements of, and the use of, such
certificates; amending s. 631.820, F.S.; conforming
provisions to changes made by the act; amending s.
631.821, F.S.; making a technical change; providing
applicability of specified provisions to certain long-
term care assessment obligations; providing a

654309 - h0673-line 402 2.docx